### Case 17-02592 Doc 1 Filed 01/30/17 Entered 01/30/17 15:01:42 Desc Main Document Page 1 of 80

| Fill in this information to identify your case:                                 |   |                                    |
|---|---|------------------------------------|
| United States Bankruptcy Court for the:  Northern District of: Illinois (State) |   |                                    |
| Case number (if known)  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Ider                        | ntify Yourself |                            |   |
|-------------------------------------|----------------|----------------------------|---|
|                                     |                | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full                        | name           | Angela                     |   |
| Write the na                        | ame that is on | First name                 | First name                                    |
| , ,                                 | nment-issued   | Middle name                | Middle name                                   |
| example, yo                         | our driver's   | Griggs                     |   |
| license or p                        | assport        | Last name                  | Last name                                     |
| Bring your identificatio meeting wi |                | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All other                        | names vou      |                            |   |
|                                     | d in the last  | First name                 | First name                                    |
| 8 years                             |                |                            |   |
| Include you                         | ur married or  | Middle name                | Middle name                                   |
| maiden nar                          | nes.           | Last name                  | Last name                                     |
|                                     |                | First name                 | First name                                    |
|                                     |                | Thermanic                  | Tristriano                                    |
|                                     |                | Middle name                | Middle name                                   |
|                                     |                | Last name                  | Last name                                     |
| 3. Only the of your S               | last 4 digits  | XXX - XX- 2679             | xxx - xx-                                     |
| Security<br>federal li              | number or      | OR                         | OR  |
| Taxpayer                            |                | 9 xx - xx-                 | 9 xx - xx-                                    |
| (ITIN)                              | adon number    |                            |   |

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| Debtor 1 Angela<br>First Name                                | Griggs Middle Name Last Name   | Case number (if known)   |
|--|--|--|
|  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. Any business names and Employer                           | I have not used any business names or EINs.  | I have not used any business names or EINs.  |
| Identification<br>Numbers (EIN) you<br>have used in the last | Business name  | Business name  |
| 8 years Include trade names and                              | Business name  | Business name  |
| doing business as names                                      | EIN  | EIN  |
|  | EIN  | EIN  |
| 5. Where you live  | 4029 W. Weekington   | If Debtor 2 lives at a different address:  |
|  | 4938 W. Washington Number Street   | Number Street  |
|  | Chicago Illinois 60644 City State Zip Code   | City State Zip Code  |
|  | Cook   | Ozurt  |
|  | County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                    | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.   |
|  | Number Street  | Number Street  |
|  | City State Zip Code  | City State Zip Code  |
| 6. Why you are choosing this district to file for bankruptcy | Check one:  ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ✓ I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
|  |  |  |

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| Debtor 1 Angela   |  | Griggs  | _ Case number (if kn  | own)   |
|---|--|---|---|--|
| First Name  | Middle Name  | Last Name   |   |  |
| Part 2: Tell the Court Ab   | out Your Bankruptcy  | Case  |   |  |
| <ol> <li>The chapter of the<br/>Bankruptcy Code you<br/>are choosing to file<br/>under</li> </ol>   |  | ef description of each, see <i>Notice Re</i> (010)). Also, go to the top of page 1 and  |   |  |
| 8. How you will pay the fee   | more details about cashier's check, of may pay with a company may be a company to the company to the conficulty of the c | nut how you may pay. Typically, if or money order If your attorney credit card or check with a pre-prime fee in installments. If you chooday Your Filing Fee in Installments or type be waived (You may requests not required to, waive your fee, atty line that applies to your family | you are paying the submitting you ated address.  se this option, signormal form 103 at this option only and may do so on size and you are to so the second form the second form the second format and may do so on size and you are to second format the second format and second format are second format and second format and you are second format the second format and second |  |
| 9. Have you filed for<br>bankruptcy within the<br>last 8 years?   | Yes. District District District  | Whe   | MM / DD / YYYY  MM / DD / YYYY  | Case number  Case number  Case number  |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No.  Yes. Debtor  District  Debtor  District   | Whe<br>Whe  | MM / DD / YYYY  | Relationship to you  Case number, if known  Relationship to you  Case number, if known |
| 11. Do you rent your residence?   | ✓ No. Go   | ndlord obtained an eviction judgment  |   |  |

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Debtor 1 Angela Griggs Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Angela Griggs Case number (if known)
First Name Middle Name Last Name

| Pa  | rt 5: Explain Your Effor  | rts to Receive a Brie   | fing About Credit Counseling   |                       |  |   |
|-----|---|---|--|-----------------------|--|---|
|     |   | About Debtor 1:   |  | About                 | Debtor 2 (Sp   | oouse Only in a Joint Case):  |
| 15. | Tell the court  | You must check one:   |  | You m                 | ust check one:   |   |
|     | whether you have received briefing about credit counseling.   | counseling agen   | ing from an approved credit<br>icy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.  | co                    | unseling ager  | ing from an approved credit<br>ncy within the 180 days before I<br>optcy petition, and I received a<br>npletion.  |
|     | The law requires that you receive a briefing  |   | he certificate and the payment plan, veloped with the agency.  |                       |  | he certificate and the payment plan, veloped with the agency.   |
|     | about credit counseling before you file for bankruptcy. You must truthfully                               | counseling agen   | ing from an approved credit<br>acy within the 180 days before I<br>ptcy petition, but I do not have a<br>appletion.  | co                    | unseling ager  | ing from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, but I do not have a<br>mpletion.  |
|     | check one of the<br>following choices. If<br>you cannot do so, you<br>are not eligible to file.           |   | er you file this bankruptcy petition, opy of the certificate and payment   | you                   |  | er you file this bankruptcy petition, opy of the certificate and payment  |
|     | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques                   | ked for credit counseling services ad agency, but was unable to vices during the 7 days after I t, and exigent circumstances emporary waiver of the                              | fro<br>ob<br>ma<br>me | m an approve<br>tain those se<br>ade my reques                             | ked for credit counseling services<br>ed agency, but was unable to<br>vices during the 7 days after I<br>st, and exigent circumstances<br>emporary waiver of the                  |
|     | creditors can begin collection activities again.  | requirement, attac<br>efforts you made t<br>unable to obtain it   | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this     | rec<br>effo<br>una    | quirement, attao<br>orts you made<br>able to obtain it<br>at exigent circu | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this    |
|     |   |   | e dismissed if the court is dissatisfied<br>for not receiving a briefing before<br>ruptcy.   | wit                   |  | e dismissed if the court is dissatisfied<br>for not receiving a briefing before<br>ruptcy.  |
|     |   | receive a briefing<br>must file a certifica<br>with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | rec<br>mu<br>wit      | ceive a briefing<br>st file a certifica<br>h a copy of the                 | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |
|     |   | •   | he 30-day deadline is granted only<br>mited to a maximum of 15 days.   |                       | ,  | he 30-day deadline is granted only<br>mited to a maximum of 15 days.  |
|     |   | I am not required counseling beca                                 | d to receive a briefing about credit use of:   |                       | m not require<br>unseling beca   | d to receive a briefing about credit ause of:   |
|     |   | Incapacity.   | I have a mental illness or a mental<br>deficiency that makes me<br>incapable of realizing or making<br>rational decisions about finances.  |                       | Incapacity.  | I have a mental illness or a mental<br>deficiency that makes me<br>incapable of realizing or making<br>rational decisions about finances.   |
|     |   | Disability.   | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.     |                       | Disability.  | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.      |
|     |   | Active duty.  | I am currently on active military duty in a military combat zone.  |                       | Active duty.   | I am currently on active military duty in a military combat zone.   |
|     |   | about credit coun   | are not required to receive a briefing seling, you must file a motion for bunseling with the court.  | ab                    | out credit cour  | are not required to receive a briefing seling, you must file a motion for ounseling with the court.   |

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Debtor 1 Angela Griggs Case number (if known) Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Angela Griggs Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 1/30/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Angela                                  |                            | Griggs                | Case number (if k            | nown)   |
|--|----------------------------|-----------------------|------------------------------|---|
| First Name                                       | Middle Name                | Last Name             |                              |   |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12  | 2, or 13 of title 11, United | ave informed the debtor(s) about<br>I States Code, and have explained the<br>Iso certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requi | red by 11 U.S.C. § 3  | 342(b) and, in a case in w   | hich § 707(b)(4)(D) applies, certify that I   |
| represented by an                                | have no knowledge after    | an inquiry that the i | nformation in the schedu     | ules filed with the petition is incorrect.  |
| attorney, you do not                             | 4.5                        |                       |                              |   |
| need to file this page.                          | /s/ Angie Harb             |                       | Date                         | 1/30/2017   |
|  | Signature of Attorney for  | r Debtor              | M                            | M / DD / YYYY   |
|  |                            |                       |                              |   |
|  |                            |                       |                              |   |
|  | Angie Harb                 |                       |                              |   |
|  | Printed name               |                       |                              |   |
|  | Semrad Law Firm            |                       |                              |   |
|  | Firm name                  |                       |                              |   |
|  | 20 S. Clark Street         |                       |                              |   |
|  | Street                     |                       |                              |   |
|  | 28th Floor                 |                       |                              |   |
|  | 201111001                  |                       |                              |   |
|  | Chicago                    |                       | Illinois                     | 60603   |
|  | City                       |                       | State                        | Zip Code  |
|  | •                          |                       |                              | ·   |
|  | Contact phone              | 3128374024            | Email address                | aharb@semradlaw.com   |
|  |                            |                       | <del></del>                  |   |
|  |                            |                       | Illinois                     |   |
|  | Bar number                 |                       | State                        |   |

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| Fill in this infor        | mation to identify your ca | ase:        |                              |
|---------------------------|----------------------------|-------------|------------------------------|
| Debtor 1                  | Angela                     |             | Griggs                       |
|                           | First Name                 | Middle Name | Last Name                    |
| Debtor 2                  |                            |             |                              |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name                    |
| United States E           | Bankruptcy Court for the:  | Northern    | District of Illinois (State) |
| Case number<br>(lf known) |                            |             | (State)                      |

|   | Check if | this    | is | an |
|---|----------|---------|----|----|
| _ | amende   | d filir | ng |    |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | Your assets Value of what you own                  |
|--|--|
| 0.1.1.1.1.7.7.7.1.1.1.1.1.1.1.1.1.1.1.1.   |  |
| . Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$0.00   |
| Ta. Copy line 30, Total real estate, nom <i>correctile PVD</i>   | ¢10.040.00   |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$18,246.00<br>——————————————————————————————————— |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$18,246.00  |
| art 2: Summarize Your Liabilities  |  |
|  |  |
|  | Your liabilities<br>Amount you owe                 |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)   |  |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D   | \$24,887.00  |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00   |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | ·  |
| Ob. One the total drive for Period (consist to consist the consist of the consist | \$23,820.00  |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  |  |
| Your total liabilities   | \$48,707.00  |
| Your total liabilities   | \$48,707.00  |
|  | \$48,707.00  |
| Your total liabilities  Part 3: Summarize Your Income and Expenses  Schedule I: Your Income (Official Form 106I)   | \$2,316.47   |
| Your total liabilities Part 3: Summarize Your Income and Expenses  | <u> </u>   |
| Your total liabilities  Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I)  | <u> </u>   |

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Griggs Debtor 1 Angela \_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,069.15 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                           | inforr                 | nation to identify your c   | case:  |                      |   |                                    |   |   |
|--|------------------------|---|--|----------------------|---|------------------------------------|---|---|
| Dobtor 1                               |                        | Angolo  |  |                      | Griggo  |                                    |   |   |
| Debtor 1                               |                        | Angela<br>First Name  | Middle N   | lame                 | Griggs<br>Last Name   | <del></del>                        |   |   |
| Debtor 2                               |                        |   |  |                      |   |                                    |   |   |
| (Spouse, if fil                        | ing)                   | First Name  | Middle N   | lame                 | Last Name   |                                    |   |   |
| United Sta                             | ites B                 | ankruptcy Court for the:  | Northern   |                      | District of Illinois (State)                                |                                    |   |   |
| Case num<br>(If known)                 | ber                    |   |  |                      |   | <del></del>                        |   |   |
| Officia                                | l Fo                   | orm 106A/B  |  |                      |   |                                    |   | Check if this is an amended filing                                  |
| Sched                                  | lub                    | e A/B: Prope  | erty   |                      |   |                                    |   | 12/1  |
| category v<br>responsibl<br>write your | vhere<br>e for<br>name | you think it fits best. I<br>supplying correct infor<br>e and case number (if I | Be as complete a<br>rmation. If more s<br>known). Answer e | nd a<br>pace<br>very | •   | married people<br>rate sheet to th | e are filing together, bo<br>is form. On the top of a | th are equally  |
|  |                        |   |  |                      | or Other Real Estate Yo                                     |                                    |   |   |
|  |                        |   | quitable interest  | in an                | y residence, building, land                                 | l, or similar prop                 | perty?  |   |
|  |                        | Go to Part 2  |  |                      |   |                                    |   |   |
|  | Yes.                   | Where is the property?  |  |                      |   |                                    |   |   |
|  |                        |   |  | Wh                   | at is the property? Check a                                 | all that apply.                    |   | red claims or exemptions. Put secured claims on <i>Schedule D</i> : |
| 1.1                                    | Stree                  | t address, if available, or   | other description  | 느                    | Single-family home  |                                    |   | Claims Secured by Property.   |
|  |                        |   |  | L                    | Duplex or multi-unit building<br>Condominium or cooperation | _                                  | Current value of th                                   | e Current value of the  |
|  |                        |   |  | H                    | Manufactured or mobile hor                                  |                                    | entire property?                                      | portion you own?  |
|  |                        |   |  | H                    | Land  |                                    |   |   |
|  | Num                    | ber Street  |  | H                    | Investment property   |                                    |   | e of your ownership   |
|  |                        |   |  | F                    | Timeshare   |                                    |   | ee simple, tenancy by<br>life estate), if known.                    |
|  | City                   | State   | Zip Code   |                      | Other   |                                    |   |   |
|  |                        |   |  |                      | o has an interest in the pr                                 | operty? Check                      | Check if this is (see instruction                     | s community property<br>ns)   |
|  |                        |   |  | one                  | Debtor 1 only   |                                    | Ш   |   |
|  |                        |   |  | H                    | Debtor 2 only   |                                    |   |   |
|  |                        |   |  | H                    | Debtor 1 and Debtor 2 only                                  |                                    |   |   |
|  |                        |   |  | H                    | At least one of the debtors a                               | and another                        |   |   |
|  |                        |   |  | Otl                  | ner information you wish to                                 | add about this                     | s item, such as local                                 |   |
|  |                        |   |  |                      | perty identification number                                 |                                    |   |   |
| If you                                 | own                    | or have more than one, I  | ist here:  |                      |   |                                    |   |   |
| 1.2                                    |                        |   |  | Wh                   | at is the property? Check a                                 | all that apply.                    |   | red claims or exemptions. Put secured claims on <i>Schedule D</i> : |
| 1.2                                    | Stree                  | t address, if available, or   | other description  | H                    | Single-family home  Duplex or multi-unit building           | a                                  | Creditors Who Have                                    | Claims Secured by Property.   |
|  |                        |   |  | H                    | Condominium or cooperative                                  |                                    | Current value of th                                   |   |
|  |                        |   |  | H                    | Manufactured or mobile hor                                  |                                    | entire property?                                      | portion you own?  |
|  |                        |   |  | H                    | Land  |                                    | <del> </del>  |   |
|  | Num                    | ber Street  |  |                      | Investment property   |                                    |   | e of your ownership<br>ee simple, tenancy by                        |
|  | 0                      | 0   |  |                      | Timeshare   |                                    |   | life estate), if known.   |
|  | City                   | State   | Zip Code   |                      | Other   |                                    |   |   |
|  |                        |   |  | Wh<br>one            | o has an interest in the pr                                 | operty? Check                      | Check if this is<br>(see instructio                   | s community property<br>ns)   |
|  |                        |   |  |                      | Debtor 1 only   |                                    | ш   |   |
|  |                        |   |  | F                    | Debtor 2 only   |                                    |   |   |
|  |                        |   |  | H                    | Debtor 1 and Debtor 2 only                                  |                                    |   |   |
|  |                        |   |  | F                    | At least one of the debtors a                               | and another                        |   |   |
|  |                        |   |  |                      | ner information you wish to<br>perty identification numbe   |                                    | s item, such as local                                 |   |

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| 1.3Stre                       | First Name eet address, if available, or or                         |   | Last Name  What is the property? Check all that  Single-family home  | apply.            |  | claims or exemptions. Put   |
|-------------------------------|---|---|--|-------------------|--|---|
|                               | eet address, if available, or o                                     |   | _  | apply.            |  | ·   |
|                               |   | inel description                          | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land  |                   | _  | red claims on Schedule D:<br>ims Secured by Property.  Current value of the<br>portion you own? |
| Nui<br>City                   | mber Street y State   | Zip Code                                  | Investment property Timeshare Other  | _                 | Describe the nature of interest (such as fee s the entireties, or a life | imple, tenancy by   |
|                               |   |   | Who has an interest in the property  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and an  Other information you wish to add a | other             | Check if this is co<br>(see instructions)  such as local                 | mmunity property  |
|                               | I the dollar value of the po<br>ave attached for Part 1. W          | ortion you own for                        | property identification number:<br>all of your entries from Part 1, incluere.  | uding any entries | s for pages  |   |
| <b>Oo you o</b> v<br>ou own t | that someone else drives. If<br>ans, trucks, tractors, sport u<br>o | equitable interes<br>you lease a vehicle, | t in any vehicles, whether they are<br>also report it on Schedule G: Executo<br>cycles   | -                 | -  |   |
| 3.1                           |   | Chevy<br>Cruze<br>2016                    | Who has an interest in the propone.  Debtor 1 only   | perty? Check      | the amount of any secu   | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.                  |
|                               | Approximate mileage: Other information: 2016 Chevy Cruze            | 20000                                     | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an  |                   | Current value of the entire property?<br>\$16914.00                      | Current value of the portion you own?<br>\$16914.00   |
| 3.2                           | Make<br>Model:<br>Year:   |   | instructions)  Who has an interest in the propone.  Debtor 1 only  |                   | the amount of any secu   | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>aims Secured by Property.     |
|                               | Approximate mileage:  |   | Debtor 2 only  |                   | Current value of the   | Current value of the  |

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| 3.3 M<br>M<br>Ye   | rst Name   | Middle Name | Last Name  |  |  |
|--|--|-------------|--|--|--|
| M<br>Ye  |  |             |  |  |  |
| Υe   |  |             | Who has an interest in the property? Chec  |  | claims or exemptions. P  |
|  | Model:   |             | one.   |  | ured claims on <i>Schedule</i><br>aims Secured by Propert  |
| At   | 'ear:  |             | Debtor 1 only  | Creditors virio have Ci  | aims secured by Property   |
|  | pproximate mileage:  |             | Debtor 2 only  | Current value of the   | Current value of the   |
| Of   | Other information:   |             | Debtor 1 and Debtor 2 only   | entire property?   | portion you own?   |
|  |  |             | At least one of the debtors and another  |  |  |
|  |  |             | Check if this is community property (se  | :ee  |  |
|  |  |             | instructions)  |  |  |
| 3.4 M  | Anko   |             | Who has an interest in the preparty? Chas  | ok Do not doduct cooured   | I alaima ar avamatiana D   |
|  | nake<br>Nodel:   |             | Who has an interest in the property? Checone.  |  | l claims or exemptions. Pured claims on <i>Schedule</i>  |
|  | 'ear:  |             | Debtor 1 only  | ,  | aims Secured by Property   |
|  | pproximate mileage:  |             | Debtor 2 only  |  |  |
| •  |  |             | <b>—</b> ′   | Current value of the entire property?  | Current value of the portion you own?  |
| Of   | Other information:   |             | Debtor 1 and Debtor 2 only   | entire property:   | portion you own:   |
|  |  |             | At least one of the debtors and another  |  |  |
|  |  |             | Check if this is community property (se  | see  |  |
|  |  |             | instructions)  |  |  |
| Example No   | les: Boats, trailers, motors   |             | er recreational vehicles, other vehicles, and a<br>t, fishing vessels, snowmobiles, motorcycle acces   |  |  |
| No Yes   | oles: Boats, trailers, motors<br>o<br>es<br>Make   |             | t, fishing vessels, snowmobiles, motorcycle access  Who has an interest in the property? Chec  | essories<br>ck Do not deduct secured   | · · · · · · · · · · · · · · · · · · ·  |
| No Yes   | o<br>o<br>o<br>os<br>Make<br>Model:  |             | t, fishing vessels, snowmobiles, motorcycle access  Who has an interest in the property? Checone.  | ck Do not deduct secured the amount of any sec   | ured claims on <i>Schedule</i>   |
| No Yes  4.1 M  M  Yes  | oles: Boats, trailers, motors<br>o<br>es<br>Make   |             | t, fishing vessels, snowmobiles, motorcycle access  Who has an interest in the property? Checone.  Debtor 1 only   | ck Do not deduct secured<br>the amount of any sec<br>Creditors Who Have Cl   | claims or exemptions. Pured claims on Schedule   |
| Yes  4.1 M  M  Yes   | les: Boats, trailers, motors<br>o<br>ss<br>Make<br>Model:<br>ear:<br>.pproximate mileage:  |             | who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only   | ck Do not deduct secured the amount of any secured Creditors Who Have Cl.  Current value of the  | ured claims on Schedule aims Secured by Property  Current value of the   |
| Yes  4.1 M  M  Yes   | oles: Boats, trailers, motors<br>oles<br>Make<br>Model:<br>'ear:   |             | who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | ck Do not deduct secured<br>the amount of any sec<br>Creditors Who Have Cl   | ured claims on <i>Schedule</i><br>aims Secured by Property   |
| Yes  4.1 M  M  Yes   | les: Boats, trailers, motors<br>o<br>ss<br>Make<br>Model:<br>ear:<br>.pproximate mileage:  |             | who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only   | ck Do not deduct secured the amount of any secured Creditors Who Have Cl.  Current value of the  | ured claims on Schedule aims Secured by Property  Current value of the   |
| Yes  4.1 M  M  Yes   | les: Boats, trailers, motors<br>o<br>ss<br>Make<br>Model:<br>ear:<br>.pproximate mileage:  |             | who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see   | ck Do not deduct secured the amount of any secured the amount of any secured the control of the  | ured claims on Schedule aims Secured by Property  Current value of the   |
| Yes  4.1 M  M  Yes   | les: Boats, trailers, motors<br>o<br>ss<br>Make<br>Model:<br>ear:<br>.pproximate mileage:  |             | who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | ck Do not deduct secured the amount of any secured the amount of any secured the control of the  | ured claims on Schedule aims Secured by Property  Current value of the   |
| Yes  4.1 M  M  Yes   | les: Boats, trailers, motors  s Make Model: fear: pproximate mileage:  Other information:  |             | who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see   | Do not deduct secured the amount of any secured the amount of any secured the current value of the entire property?  | ured claims on Schedule aims Secured by Property  Current value of the   |
| Example  Ves  Ves  4.1 M  M  Yes  Ar  Other  4.2 M   | les: Boats, trailers, motors  s Make Model: fear: pproximate mileage:  Other information:  |             | Who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions)   | ck Do not deduct secured the amount of any secured the amount of the entire property?  Current value of the entire property?  See Do not deduct secured the amount of any secu | ured claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule                          |
| Example  Ves  Ves  4.1 M  M  Yes  Ar  Other  4.2 M  M  Yes  Ar  Ves  Ar  Ar  Ar  Ar  Ar  Ar  Ar  Ar  Ar  A | les: Boats, trailers, motors output sis Make Model: fear: supproximate mileage: Other information:  Make Model: fear:                      |             | Who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) Who has an interest in the property? Check  | ck Do not deduct secured the amount of any secured the amount of the entire property?  Current value of the entire property?  See Do not deduct secured the amount of any secu | ured claims on Schedule aims Secured by Property  Current value of the portion you own?  Claims or exemptions. F   |
| Example  Ves  Ves  4.1 M  M  Yes  Ar  Other  4.2 M  M  Yes  Ar  Ves  Ar  Ar  Ar  Ar  Ar  Ar  Ar  Ar  Ar  A | les: Boats, trailers, motors output sis Make Model: fear: supproximate mileage: Other information:  Make Model:                            |             | Who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions)  Who has an interest in the property? Checone.  | ck Do not deduct secured the amount of any secured the amount of the entire property?  Current value of the entire property?  See Do not deduct secured the amount of any secu | ured claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule                          |
| Example  Ves  4.1 M  M  Yes  Ar  On  4.2 M  M  Yes  Ar  Ar  Ar  Ar   | les: Boats, trailers, motors output sis Make Model: fear: supproximate mileage: Other information:  Make Model: fear:                      |             | Who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (so instructions)  Who has an interest in the property? Checone. Debtor 1 only  | Ck Do not deduct secured the amount of any secured the amount of the continuous continuo | ured claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule aims Secured by Property |
| Example  Ves  4.1 M  M  Yes  Ar  On  4.2 M  M  Yes  Ar  Ar  Ar  Ar   | les: Boats, trailers, motors outs lase Make Model: Pear: Pepproximate mileage: Other information:  Make Model: Pear: Pepproximate mileage: |             | who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (se instructions)  Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | ck Do not deduct secured the amount of any secured the amount of the entire property?  Current value of the entire property?  See Do not deduct secured the amount of any secured the amount of any secured the amount of the Current value of the   | claims or exemptions. Pured claims or exemptions. Pured claims or exemptions. Pured claims on Schedule aims Secured by Property.                                 |
| Example  Ves  4.1 M  M  Yes  Ar  On  4.2 M  M  Yes  Ar  Ar  Ar  Ar   | les: Boats, trailers, motors outs lase Make Model: Pear: Pepproximate mileage: Other information:  Make Model: Pear: Pepproximate mileage: |             | Who has an interest in the property? Checone.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions)  Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only   | Ck Do not deduct secured the amount of any secured the entire property?  Current value of the entire property?  Ck Do not deduct secured the amount of any secured the amount of any secured the entire property?  Current value of the entire property?   | claims or exemptions. Pured claims or exemptions. Pured claims or exemptions. Pured claims on Schedule aims Secured by Property.                                 |

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| De       | ebtor 1                 | Angela<br>First Name            | Middle Name  | Griggs<br>Last Name          | Case number (if known)   |  |
|----------|-------------------------|---------------------------------|--|------------------------------|--|--|
| Pa       | rt 3:                   |                                 | our Personal and Household Ite   |                              |  |  |
| D        | o you                   | own or hav                      | e any legal or equitable interest  | in any of the following      | g items?   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|          | Examp                   | _                               | and furnishings<br>liances, furniture, linens, china, kitchenv                                       | ware                         |  |  |
| <u>✓</u> | No<br>Yes. [            | Describe                        | used furniture   |                              |  | \$600.00   |
|          |                         | tronics<br>les: Television      | s and radios; audio, video, stereo, and o  | digital equipment; compute   | ers, printers, scanners; music   |  |
| <b>✓</b> |                         | Describe                        | tv, cellphone  |                              |  | \$300.00   |
|          | Examp                   |                                 | ue<br>and figurines; paintings, prints, or other<br>in, or baseball card collections; other co       |                              | The state of the s |  |
| <b>✓</b> | No<br>Yes. [            | Describe                        |  |                              |  |  |
|          |                         | les: Sports, ph                 | orts and hobbies<br>notographic, exercise, and other hobby eas; carpentry tools; musical instruments | equipment; bicycles, pool to | ables, golf clubs, skis; canoes  |  |
| <b>✓</b> | No<br>Yes. [            | Describe                        |  |                              |  |  |
|          | <b>0. Fire</b><br>Examp |                                 | es, shotguns, ammunition, and related  | equipment                    |  | 1  |
| ✓        | No<br>Yes T             | Describe                        |  |                              |  |  |
| Ш        | 100. 1                  | 30001130                        |  |                              |  |  |
|          |                         |                                 | clothes, furs, leather coats, designer wea   | ar, shoes, accessories       |  |  |
| <u> </u> | No<br>Yes. [            | Describe                        | used clothing  |                              |  | \$300.00   |
|          |                         | -                               | ewelry, costume jewelry, engagement ri<br>er   | ings, wedding rings, heirloo | om jewelry, watches, gems,   |  |
| <u> </u> | No<br>Yes. [            | Describe                        | used jewelry   |                              |  | \$100.00   |
|          | Examp                   | n-farm animal<br>les: Dogs, cat | s, birds, horses   |                              |  |  |
| <b>✓</b> | No<br>Yes. [            | Describe                        |  |                              |  |  |
|          |                         | other persor                    | nal and household items you did not a  | already list, including any  | y health aids you did not list   |  |
|          | No<br>Yes. [            | Describe                        |  |                              |  |  |
| ш        |                         |                                 |  | to the second second         |  |  |
|          |                         |                                 | ilue of all of your entries from Part 3,<br>t number here  | , including any entries for  | r pages you have attached  | \$1300.00  |

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Griggs Debtor 1 Angela Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$32.00 17.1. Checking account: chase 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Angela                                      |   | Griggs                      | Case number (if known)                      |  |
|------|---|---|-----------------------------|---|--|
|      | First Name  | Middle Name   | Last Name                   |   |  |
| 20.  | Negotiable instruments                            | porate bonds and other negotia include personal checks, cashiers nents are those you cannot transfer assuer name: | checks, promissory no       | tes, and money orders.                      |  |
|      |   |   |                             |   |  |
| 21.  | Retirement or pension<br>Examples: Interests in I |   | ), thrift savings accounts  | s, or other pension or profit-sharing plans |  |
|      |   | Type of account:  | Institution name:           |   |  |
|      | Yes. List each account                            | 401(k) or similar plan:   |                             |   |  |
|      | separately.                                       | Pension plan:   |                             |   |  |
|      |   | IRA:  |                             |   |  |
|      |   | Retirement account:   |                             |   |  |
|      |   | Keogh:  |                             |   |  |
|      |   | Additional account:   |                             |   |  |
|      |   | Additional account:   |                             |   |  |
| 22.  |   | d prepayments Id deposits you have made so that with landlords, prepaid rent, publi                               |                             |   |  |
|      | Yes   | Electric:   |                             |   |  |
|      |   | Gas:  |                             |   |  |
|      |   | Heating oil:  |                             |   |  |
|      |   | Security deposit on rental unit:  |                             |   |  |
|      |   | Prepaid rent:   |                             |   |  |
|      |   | Telephone:  |                             |   |  |
|      |   | Water:  |                             |   |  |
|      |   | Rented furniture:   |                             |   |  |
|      |   | Other:  |                             |   |  |
| 23.  | _   | or a periodic payment of money to   | you, either for life or for | r a number of years)                        |  |
|      | ✓ No  Yes   | Issuer name and description:  |                             |   |  |
|      |   |   |                             |   |  |
|      |   |   |                             |   |  |
|      |   |   |                             |   |  |

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| Debt | or 1 Angela<br>First Name  | Griggs Case number (if known)  Middle Name Last Name   |  |
|------|--|--|--|
| 24.  | Interests in a   | an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition prog   | ram.   |
|      | _  | 530(b)(1), 529A(b), and 529(b)(1).   |  |
|      | V No Yes   | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):   |  |
|      |  |  |  |
|      |  |  |  |
| 25.  |  | cable or future interests in property (other than anything listed in line 1), and rights or powers for your benefit  |  |
|      | No Yes. Desc   | cribe  |  |
|      |  |  |  |
| 26.  |  | oyrights, trademarks, trade secrets, and other intellectual property ternet domain names, websites, proceeds from royalties and licensing agreements   |  |
|      | √ No   |  |  |
|      | Yes. Desc  | cribe  |  |
| 27.  | Licenses fra   | unchises, and other general intangibles  |  |
| 21.  |  | illding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  |  |
|      | ✓ No   | ovih o   |  |
|      | Yes. Desc  | cribe  |  |
|      |  |  |  |
| Mor  | ney or proper  | rty owed to you?   | Current value of the portion you own?  Do not deduct secured claims or exemptions.   |
|      | ney or proper  |  | portion you own?   |
|      | Tax refunds ov   | wed to you   | portion you own?  Do not deduct secured claims or exemptions.  |
|      | Tax refunds on  No Yes. Give s abou  | specific information ut them, including whether  | portion you own? Do not deduct secured claims or exemptions.   |
|      | Tax refunds on  No Yes. Give s about   | specific information ut them, including whether already filed the returns the tax years  | portion you own? Do not deduct secured claims or exemptions.  \$0.00   |
| 28.  | Tax refunds on  No Yes. Give s about you a and t   | specific information ut them, including whether already filed the returns the tax years Local:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00   |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past  | specific information ut them, including whether already filed the returns the tax years  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00   |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past  | specific information ut them, including whether already filed the returns the tax years  It tocal:  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement.  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00   |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past  | specific information ut them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property s | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past  | specific information  It them, including whether already filed the returns the tax years   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past  | specific information ut them, including whether already filed the returns the tax years  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 ement  \$0.00 \$0.00 \$0.00   |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past  | specific information ut them, including whether already filed the returns the tax years  rt tit due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement, proper | ## sportion you own?  Do not deduct secured claims or exemptions.  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past No Yes. Give s  Other amount Examples: Unp      | specific information ut them, including whether already filed the returns the tax years  rt  tt due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settl specific information  Alimony: Maintenance: Support: Divorce settlement   | ## sportion you own?  Do not deduct secured claims or exemptions.  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  #### \$0.00  #### \$0.00              |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past No Yes. Give s  Other amount Examples: Unp      | specific information ut them, including whether already filed the returns the tax years  | ## sportion you own?  Do not deduct secured claims or exemptions.  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  #### \$0.00  #### \$0.00  #### \$0.00 |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp Soc | specific information  It them, including whether already filed the returns the tax years   | ## sportion you own?  Do not deduct secured claims or exemptions.  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  ### \$0.00  #### \$0.00  #### \$0.00  #### \$0.00 |

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| Deb  | tor 1 Angela   | Griggs                                  | Case number (if known)                         |   |
|------|--|---|--|---|
|      | First Name Middle Nar  | ne Last Name                            |  |   |
| 31.  | Interests in insurance policies  Examples: Health, disability, or life insurance; h  | realth savings account (HSA); credit, h | omeowner's, or renter's insurance              |   |
|      | No  ✓ Yes. Name the insurance company  | Company name:                           | Beneficiary:                                   | Surrender or refund value:  |
|      | of each policy and list its value  | unum life insurance                     |  | \$0.00  |
|      |  |   |  |   |
| 32.  | Any interest in property that is due you from If you are the beneficiary of a living trust, expending property because someone has died. |   | y, or are currently entitled to receive        |   |
|      | No Yes. Describe   |   |  |   |
| 33.  | Claims against third parties, whether or no Examples: Accidents, employment disputes, in   |   | a demand for payment                           |   |
|      | ✓ No Yes. Describe   |   |  |   |
| 34.  | Other contingent and unliquidated claims to set off claims   | of every nature, including counterc     | claims of the debtor and rights                |   |
|      | ✓ No   |   |  |   |
|      | Yes. Describe  |   |  |   |
| 35.  | Any financial assets you did not already lis   | t                                       |  |   |
|      | ✓ No ✓ Yes. Describe   |   |  |   |
|      |  |   |  |   |
| 36.  | Add the dollar value of all of your entries fr for Part 4. Write that number here  |   |  | \$32.00   |
|      |  |   |  |   |
| Part | 5: Describe Any Business-Related P   | roperty You Own or Have an Ir           | nterest In. List any real estate in Part       | 1.  |
| 37.  | Do you own or have any legal or equitable  | interest in any business-related pro    | operty?  |   |
|      | No. Go to Part 6. Yes. Go to line 38.  |   | <b>р</b><br>С                                  | current value of the ortion you own? On not deduct secured claims |
| 38.  | Accounts receivable or commissions you a   | Iready earned                           | 0  | r exemptions  |
|      | ✓ No Yes. Describe   |   |  |   |
| 39.  | Office equipment, furnishings, and supplies Examples: Business-related computers, software   |   | chines, rugs, telephones, desks, chairs, elect | ronic devices   |
|      | ✓ No  Vac Describe   |   |  |   |
|      | Yes. Describe  |   |  |   |

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| Debt   | tor 1 Angela                                       | Griggs                                   | Case number (if known)         |  |
|--------|--|--|--------------------------------|--|
| 1.0    | First Name Middle Nam                              |  |                                |  |
| 40.    | Machinery, fixtures, equipment, supplies yo        | u use in business, and tools of your     | trade                          |  |
|        | <b>✓</b> No  |  |                                |  |
|        | Yes. Describe                                      |  |                                |  |
|        |  |  |                                |  |
| 41     | Inventory  |  |                                |  |
|        | <u> </u>   |  |                                |  |
|        | ✓ No   |  |                                |  |
|        | Yes. Describe                                      |  |                                |  |
|        |  |  |                                |  |
| 42.    | Interests in partnerships or joint ventures        |  |                                |  |
|        | ✓ No   |  |                                |  |
|        | Yes. Give specific                                 | Name of entity:                          | % of ownership:                |  |
|        | information about                                  |  |                                | <u> </u>                                   |
|        | them   |  |                                |  |
|        |  |  |                                |  |
|        |  |  | <del></del>                    | <del>-</del>                               |
| 43.    | Customer lists, mailing lists, or other compile    | ations                                   |                                |  |
|        | <b>✓</b> No  |  |                                |  |
|        | Yes. Do your lists include personally identif      | iable information (as defined in 11 U.S. | C. § 101(41A))?                |  |
|        | ☐ No   |  |                                |  |
|        | Yes. Describe                                      |  |                                |  |
|        |  |  |                                |  |
| 44.    | Any business-related property you did not a        | lready list                              |                                |  |
|        | <b>✓</b> No  |  |                                |  |
|        | Yes. Give specific                                 |  |                                | <del></del>                                |
|        | information  |  |                                | <u> </u>                                   |
|        |  |  |                                |  |
|        |  |  |                                | <u> </u>                                   |
|        |  |  |                                | <del></del>                                |
|        |  |  |                                |  |
|        |  |  |                                |  |
|        |  |  |                                |  |
| 45. A  | dd the dollar value of all of your entries from    | Part 5, including any entries for page   | ges you have attached          |  |
| for Pa | art 5. Write that number here                      |  |                                |  |
| Part   | 6: Describe Any Farm- and Commerc                  | cial Fishing-Related Property Y          | ou Own or Have an Interest In. |  |
| rait   | If you own or have an interest in farmland, list i |  |                                |  |
| 46.    | Do you own or have any legal or equitable i        | nterest in any farm- or commercial       | fishing-related property?      |  |
|        | No. Go to Part 7.                                  | -  |                                | Current value of the                       |
|        | Yes. Go to line 47.                                |  |                                | portion you own?                           |
|        | Test do to line 47.                                |  |                                | Do not deduct secured claims or exemptions |
| 47.    | Farm animals                                       |  |                                |  |
|        | Examples: Livestock, poultry, farm-raised fish     |  |                                |  |
|        | <b>✓</b> No  |  |                                |  |
|        | Yes. Describe                                      |  |                                |  |
|        | _  |  |                                |  |
|        |  |  |                                |  |

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| Debte          | or 1 Angela<br>First Name | Middle Name                                | Griggs<br>Last Name      | Case number (if known)         |              |
|----------------|---------------------------|--|--------------------------|--------------------------------|--------------|
| 48.            | Crops-either growing      |  |                          |                                |              |
|                | No Yes. Describe          |  |                          |                                |              |
| 49.            | <b>✓</b> No               | oment, implements, machinery, fixtu        | ires, and tools of trade |                                |              |
|                | Yes. Describe             |  |                          |                                |              |
| 50.            | Farm and fishing suppl    | lies, chemicals, and feed                  |                          |                                |              |
|                | Yes. Describe             |  |                          |                                |              |
| 51.            | Any farm- and commer      | <br>rcial fishing-related property you did | d not already list       |                                |              |
|                | No Yes. Describe          |  |                          |                                |              |
|                |                           | I of your entries from Part 6, includi     | ng any entries for pages | you have attached              |              |
| Part 7         | : Describe All Pro        | perty You Own or Have an Inte              | rest in That You Did N   | ot List Above                  |              |
| 53.            | Do you have other prop    | perty of any kind you did not already      |                          |                                |              |
|                |                           | s, country club membership                 |                          |                                |              |
|                | ✓ No ☐ Yes. Give specific |  |                          |                                |              |
|                | information               |  |                          |                                |              |
| 54 Ac          | ld the dellar value of al | I of your entries from Part 7. Write t     | hat number here          | 1                              | •            |
| J4. AU         | id the donar value of a   | i or your entires nom Fart 7. Write t      | nat number nere          |                                |              |
|                |                           |  |                          |                                |              |
|                |                           |  |                          |                                |              |
| Part 8         | List the Totals of        | Each Part of this Form                     |                          |                                |              |
| 55. <b>P</b>   | art 1: Total real estate  | , line 2                                   |                          |                                |              |
| 56. <b>p</b>   | art 2 total vehicles, lin | e 5  | \$16914.00               |                                |              |
| 57. <b>P</b> a | art 3: Total personal an  | d household items, line 15                 | \$1300.00                |                                |              |
| 58. <b>P</b> a | art 4: Total financial as | sets, line 36                              | \$32.00                  |                                |              |
| 59. <b>P</b>   | art 5: Total business-re  | elated property, line 45                   | φοΣ.σσ                   |                                |              |
| 60. <b>P</b>   | art 6: Total farm- and f  | ishing-related property, line 52           |                          |                                |              |
| 61. <b>P</b>   | art 7: Total other prop   | erty not listed, line 54                   |                          |                                |              |
| 62. <b>T</b>   | otal personal property.   | Add lines 56 through 61.                   | *18246.00                | Copy personal property total ▶ | + \$18246.00 |
| 63. <b>T</b> c | otal of all property on S | chedule A/B. Add line 55 + line 62         |                          |                                | \$18246.00   |

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| Fill in this infor     | mation to identify your c | ase:        |                      |   |
|------------------------|---------------------------|-------------|----------------------|---|
| Debtor 1               | Angela                    |             | Griggs               |   |
|                        | First Name                | Middle Name | Last Name            | _ |
| Debtor 2               |                           |             |                      |   |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name            | _ |
| United States E        | Bankruptcy Court for the: | Northern    | District of Illinois | _ |
| Case number (If known) |                           |             | (State)              | _ |

### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$32.00 description: \$32.00 Checking account, 100% of fair market value, up to any chase applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$100.00 description: \$100.00 used jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) **✓** No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

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Griggs Debtor 1 Angela Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$600.00 description: **✓** \$600.00 used furniture 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief \$300.00 description: **✓** \$300.00 tv, cellphone 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(c); 735 ILCS Brief \$16,914.00 5/12-1001(b) description: **✓** Chevy Cruze, 2016, 2016 100% of fair market value, up to any **Chevy Cruze** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(a) \$300.00 description: **✓** \$300.00 used clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(f) Brief \$0.00 description:

100% of fair market value, up to any

applicable statutory limit

unum life insurance

31

Line from

Schedule A/B:

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|                  |                      |  | DC                         | r age 22 or  | 00  |   |                                       |
|------------------|----------------------|--|----------------------------|--|---|---|---------------------------------------|
| Fill in t        | this infor           | mation to identify your ca                                   | se:                        |  |   |   |                                       |
| Debto            | r 1                  | Angela   |                            | Griggs   |   |   |                                       |
|                  |                      | First Name   | Middle Name                | Last Name  |   |   |                                       |
| Debto<br>(Spouse | r 2<br>e, if filing) | First Name   | Middle Name                | Last Name  |   |   |                                       |
| United           | l States E           | sankruptcy Court for the:                                    | Northern                   | District of Illinois   |   |   |                                       |
| Case r           | number               |  |                            | (State)  |   |   |                                       |
| Offi             | cial                 | Form 106D  |                            |  | J   |   | Check if this is an<br>amended filing |
| Sch              | nedu                 | le D: Credito  | ors Who Ha                 | ve Claims Secure   | ed by Prop  |   | 12/15                                 |
| more s           | pace is              | -  |                            | e are filing together, both are equ<br>nber the entries, and attach it to t                                    | •   |   |                                       |
| 1. 🛭             | o any c              | reditors have claims se                                      | ecured by your proper      | ty?  |   |   |                                       |
|                  | No. 0                | Check this box and subm                                      | nit this form to the court | with your other schedules. You hav   | e nothing else to repo  | ort on this form.                                     |                                       |
| Ī                | ✓ Yes.               | Fill in all of the information                               | n below.                   |  |   |   |                                       |
| Part 1           | _<br>List            | All Secured Claims   |                            |  |   |   |                                       |
| 2.               | List all s           | secured claims. If a credit<br>ly for each claim. If more th | nan one creditor has a pa  | cured claim, list the creditor<br>ticular claim, list the other creditors<br>order according to the creditor's | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any     |
| 2.1              |                      | NANCIAL  | Describe the property      | that secures the claim:  | \$24,887.00   | \$16,914.00   | \$7,973.00                            |
|                  | Creditor's           | Name NAISSANCE CTR   | 2016 Chevy Cruze           | ,  |   |   |                                       |
|                  | Numb                 |  |                            | e, the claim is: Check all that apply.   |   |   |                                       |
|                  |                      |  | Contingent                 |  |   |   |                                       |
|                  | DETROI               |  | Unliquidated               |  |   |   |                                       |
|                  | City<br>Who ow       | State ZIP Code res the debt? Check one.                      | Disputed                   |  |   |   |                                       |
|                  |                      | tor 1 only   | Nature of lien. Check      | all that apply.  |   |   |                                       |
|                  |                      | tor 2 only   | An agreement you car loan) | made (such as mortgage or secured  |   |   |                                       |
|                  |                      | tor 1 and Debtor 2 only                                      | Statutory lien (such       | as tax lien, mechanic's lien)  |   |   |                                       |
|                  |                      | east one of the debtors<br>another                           | Judgment lien from         | n a lawsuit  |   |   |                                       |
|                  |                      | ck if this claim relates<br>community debt                   | Other (including a         | ight to offset)  |   |   |                                       |
|                  | Date de incurre      | bt was 4/1/2016  | Last 4 digits of accou     | nt number 5164   |   |   |                                       |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$24,887.00

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| Fill                  | in this inforr  | mation to identify your c  | ase:   |  |  |   |  |  |
|-----------------------|---|--|--|--|--|---|--|--|
| Deb                   | otor 1  | Angela   |  | Griggs   |  |   |  |  |
|                       |   | First Name   | Middle Name  | Last Name  |  |   |  |  |
|                       | otor 2  | <del></del>  |  |  |  |   |  |  |
| (Spc                  | use, if filing)   | First Name   | Middle Name  | Last Name  |  |   |  |  |
| Uni                   | ted States B  | ankruptcy Court for the:   | Northern   | District of Illinois   |  |   |  |  |
| 0                     |   |  |  | (State)  |  |   |  |  |
|                       | se number<br>lown)  |  |  |  |  |   |  |  |
| Of                    | ficial F  | orm 106E/F   |  |  |  | Che   | eck if this is an                                  | amended filing                                   |
|                       |   |  |  |  |  |   |  |  |
| Sc                    | chedu   | ile E/F: Cre   | ditors Who   | Have Unse  | cured Claims   |   |  | 12/15  |
| othe<br>Forn<br>clair | r party to a<br>n 106A/B) a<br>ns that are<br>entries in tl | any executory contracts<br>and on Schedule G: Exe<br>listed in Schedule D: C             | s or unexpired leases that<br>cutory Contracts and Une<br>reditors Who Hold Claims | could result in a claim<br>xpired Leases (Official<br>Secured by Property.             | ns and Part 2 for creditors wi  1. Also list executory contract Form 106G). Do not include a  If more space is needed, copy top of any additional pages, | s on <i>Sched</i><br>any creditor<br>the Part y | ule A/B: Prop<br>s with partia<br>ou need, fill it | perty (Official<br>Illy secured<br>t out, number |
| Par                   | t 1: List   | All of Your PRIORITY   | / Unsecured Claims   |  |  |   |  |  |
| 1.                    | Do any cr   | editors have priority un   | secured claims against yo  | ou?  |  |   |  |  |
|                       | <b>✓</b> No. 0  | Go to Part 2.  |  |  |  |   |  |  |
|                       | Yes.  |  |  |  |  |   |  |  |
| 2.                    | listed, ider<br>As much a<br>Continuati                     | ntify what type of claim it<br>as possible, list the claims<br>on Page of Part 1. If mor | is. If a claim has both priority   | y and nonpriority amoun<br>ling to the creditor's nam<br>particular claim, list the of |  | both priority                                   | and nonprior                                       | rity amounts.                                    |
|                       |   |  |  |  |  | Tatal   | Delasitu   | Mannulaultu                                      |

claim

amount

amount

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| Debto  | r 1 Angela<br>First Name   | Middle Name  | Griggs<br>Last Name   | Case number (if known)  |                    |
|--------|--|--|---|---|--------------------|
| Part 2 | <b>=</b>   |  |   |   |                    |
| 3. D   | o any creditors have nonposed.  No. You have nothing to Yes.  st all of your nonpriority unsecured claim, list the credit  | riority unsecured claims<br>o report in this part. Sub-<br>nsecured claims in the a<br>for separately for each clair | against you? mit this form to the alphabetical orde m. For each claim I | e court with your other schedules.  er of the creditor who holds each claim. If a creditor has mor isted, identify what type of claim it is. Do not list claims already i Part 3.If you have more than four priority unsecured claims fill o  | ncluded in Part 1. |
|        | age 011 an 21  |  |   |   | Total claim        |
| 4.1    | ATG CREDIT Nonpriority Creditor's Name 1700 W CORTLAND ST ST Number Street   |  |   | Last 4 digits of account number 3811  When was the debt incurred? 6/1/2014  As of the date you file, the claim is: Check all that apply.  | \$36.00            |
|        | City Who incurred the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt   | heck one.  only  ors and another  lates to a community de  | Code  | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  ✓ 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA |                    |
| 4.2    | Carmax Auto Finance<br>Nonpriority Creditor's Name   |  |   | Last 4 digits of account number   | \$1.00             |
|        | Milwaukee City Who incurred the debt? C  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2  At least one of the debt Check if this claim re Is the claim subject to off No Yes | Wisconsin 532 State Zip ( heck one.  only ors and another  lates to a community de                                   | Code  | When was the debt incurred?   |                    |
| 4.3    | CCI Nonpriority Creditor's Name 501 Greene Street # 302 Number Street Augusta  | Georgia 309  | 01  | Last 4 digits of account number 1431 When was the debt incurred? 10/1/2013 As of the date you file, the claim is: Check all that apply.  Contingent   | \$246.00           |
|        | City Who incurred the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt   | State Zip ( check one.  only ors and another  lates to a community de  | Code  | Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Collection; Collecting for ORIGINAL CREDITOR: 10 Other. Specify COMMONWEALTH EDISON                |                    |

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Debtor 1 Angela Griggs Case number (if known) Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 City of Chicago Parking \$200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 121 N. LaSalle St # 107A Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60602 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ parking tickets Is the claim subject to offset? **✓** No Yes **DRLEONARDS** \$162.00 4071 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 10/1/2011 PO BOX 2845 Number As of the date you file, the claim is: Check all that apply. Contingent MONROE 53566 Wisconsin Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes **ECMC** 4.6 \$745.00 0003 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7/1/2015 101 E FIFTH ST STE 2400 Number As of the date you file, the claim is: Check all that apply. Contingent 55101 SAINT PAUL Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

**✓** No

Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

**V** 

Other. Specify

Debts to pension or profit-sharing plans, and other similar

001 Collection; Collecting for

ORIGINAL CREDITOR: 07 SLM

**ECFC** 

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Debtor 1 Angela Griggs Case number (if known)
First Name Middle Name Last Name

|     | After listing any entries on this page, number them beginning | with 4.5. followed by 4.6. and so forth.  | Total claim |
|-----|---|---|-------------|
| 1 7 | ECMC  | • •   | \$117.00    |
| 4.7 | Nonpriority Creditor's Name                                   | Last 4 digits of account number 0001  | Φ117.00     |
|     | 101 E FIFTH ST STE 2400                                       | When was the debt incurred? 7/1/2015  |             |
|     | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|     |   | Contingent  |             |
|     | SAINT PAUL Minnesota 55101                                    | — Unliquidated  |             |
|     | City State Zip Code  Who incurred the debt? Check one.        | Disputed  |             |
|     | Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
|     | Debtor 2 only   | <u> </u>  |             |
|     | Debtor 1 and Debtor 2 only                                    | Student loans   |             |
|     | <u>'</u>  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|     | At least one of the debtors and another                       | Debts to pension or profit-sharing plans, and other similar   |             |
|     | Check if this claim relates to a community debt               | debts   |             |
|     | Is the claim subject to offset?                               | 001 Collection; Collecting for ORIGINAL CREDITOR: 07 SLM  |             |
|     | <b>✓</b> No   | Other. Specify ECFC   |             |
|     | Yes   |   |             |
| .8  | ECMC  |   | \$82.00     |
|     | Nonpriority Creditor's Name                                   | Last 4 digits of account number 0002  |             |
|     | 101 E FIFTH ST STE 2400<br>Number Street                      | When was the debt incurred? 7/1/2015  |             |
|     | Turniber Greek  | As of the date you file, the claim is: Check all that apply.  |             |
|     |   | Contingent  |             |
|     | SAINT PAUL Minnesota 55101 City State Zip Code                | — Unliquidated  |             |
|     | Who incurred the debt? Check one.                             | Disputed  |             |
|     | Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
|     | Debtor 2 only   | Student loans   |             |
|     | Debtor 1 and Debtor 2 only                                    | 불   |             |
|     | At least one of the debtors and another                       | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|     | At least one of the debtors and another                       | Debts to pension or profit-sharing plans, and other similar   |             |
|     | Check if this claim relates to a community debt               | debts   |             |
|     | Is the claim subject to offset?                               | 001 Collection; Collecting for ORIGINAL CREDITOR: 07 US   |             |
|     | ✓ No  | Other. Specify BANK NATIONAL ASSOC  |             |
|     | Yes   |   |             |
| 9   | Enterprise Rent a Car   | Lost 4 digits of account number   | \$15,414.00 |
|     | Nonpriority Creditor's Name                                   | Last 4 digits of account number   |             |
|     | 328 S. Jefferson Suite 909<br>Number Street                   | When was the debt incurred?n/a  |             |
|     | c/o James Robinson  | As of the date you file, the claim is: Check all that apply.  |             |
|     | C/O Dairies Mobilison   | Contingent  |             |
|     | Chicago Illinois 60661  | Unliquidated  |             |
|     | City State Zip Code   | Disputed  |             |
|     | Who incurred the debt? Check one.                             | Type of NONPRIORITY unsecured claim:  |             |
|     | Debtor 1 only   | Student loans   |             |
|     | Debtor 2 only   | Obligations arising out of a separation agreement or  |             |
|     | Debtor 1 and Debtor 2 only                                    | divorce that you did not report as priority claims  |             |
|     | At least one of the debtors and another                       | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|     | Check if this claim relates to a community debt               | Other. Specify judgment   |             |
|     | Is the claim subject to offset?                               |   |             |
|     | <b>✓</b> No   |   |             |
|     | Yes   |   |             |

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Debtor 1 Angela Griggs Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$511.00 Last 4 digits of account number Nonpriority Creditor's Name 3820 N LOUISE AVE When was the debt incurred? 9/1/2008 Number As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57107 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_ CreditCard Is the claim subject to offset? **✓** No Yes 4.11 **FST PREMIER** \$454.00 Last 4 digits of account number 9949 Nonpriority Creditor's Name 3820 N LÓUISE AVE When was the debt incurred? 12/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57107 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes GINNY'S INC 4.12 \$330.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 1112 7TH AVE POB 2816 When was the debt incurred? 12/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent MONROE 53566 Wisconsin Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ CreditCard Is the claim subject to offset? No **|** 

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Debtor 1 Angela Griggs Case number (if known) Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Hertz Rent A Car \$1.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 629 West Madison Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60302 Oak Park Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ notice only Is the claim subject to offset? **✓** No Yes 4.14 M3 Financial Services \$190.00 3621 Last 4 digits of account number \_\_\_ Nonpriority Creditor's Name When was the debt incurred? 1/1/2014 10330 Roosevelt Rd #200 Number Street As of the date you file, the claim is: Check all that apply. Contingent 60154 Westchester Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No PAYMENT DATA Other, Specify Yes MERRICK BANK 4.15 \$1,010.00 Last 4 digits of account number Nonpriority Creditor's Name POB 9201 When was the debt incurred? 5/1/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent OLD BETHPAGE 11804 New York Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_\_\_\_ CreditCard Is the claim subject to offset? **✓** No

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Debtor 1 Angela Griggs Case number (if known) Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 MONTGOMERY WARD \$233.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/1/2015 1112 7TH AVE Number As of the date you file, the claim is: Check all that apply. Contingent MONROE Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_ CreditCard Is the claim subject to offset? **✓** No Yes 4.17 Nicor Gas \$1.00 Last 4 digits of account number Nonpriority Creditor's Name 90 N. Finley Road When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60137 Illinois Glen Ellyn City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ notice only Is the claim subject to offset? **✓** No Yes NORTHWEST COLLECTORS 4.18 \$192.00 Last 4 digits of account number 3348 Nonpriority Creditor's Name 3601 ALGONQUIN RD STE 23 When was the debt incurred? 12/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent **ROLLING** 60008 Illinois Unliquidated **MEADOWS** State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? Other. Specify PAYMENT DATA **✓** No

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Debtor 1 Angela Griggs Case number (if known) Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Peoples Gas \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ gas bill Is the claim subject to offset? **✓** No Yes 4.20 PORTFOLIO RECOVERY ASS \$542.00 0891 Last 4 digits of account number \_\_\_ Nonpriority Creditor's Name 2/1/2015 120 CORPORATE BLVD STE 1 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent NORFOLK 23502 Virginia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes Santander Consumer USA 4.21 \$2,474.00 1000 Last 4 digits of account number Nonpriority Creditor's Name ATT POC: Janiscia Jackson PO Box 961245 When was the debt incurred? 11/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent 76161 Fort Worth Texas Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_\_\_ 072 Automobile Is the claim subject to offset? **✓** No

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Debtor 1 Angela Griggs Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 SECOND ROUND LP \$679.00 Last 4 digits of account number 7816 Nonpriority Creditor's Name 4150 FRIEDRICH LANE SUIT When was the debt incurred? 12/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent 78744 **AUSTIN** Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: GE **✓** No Other. Specify CAPITAL RETAIL BANK Yes 4.23 Village of Melrose Park \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 1 N. Broadway When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60160 Melrose Park Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify \_\_\_\_ parking tickets Is the claim subject to offset?

✓ No Yes

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Debtor 1 Angela Griggs Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Carmax Auto Finance On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 2040 Thalbro St. Line 4.21 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Richmond Virginia 23230 Last 4 digits of account number 1000 City State Zip Code GE Capital Retail Bank On which entry in Part 1 or Part 2 did you list the original creditor? PO Box 4571 Line 4.22 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Carol Stream Illinois 60197 Last 4 digits of account number 7816 City State Zip Code Comed On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check Po Box 805379 Line 4.3 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Chicago Illinois 60680 Last 4 digits of account number 1431 City State Zip Code US Bank

On which entry in Part 1 or Part 2 did you list the original creditor?

Claims

0002

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured

of (Check

one):

Last 4 digits of account number

Po Box 5229

Street

Ohio

State

45201

Zip Code

Number

Cincinnati

City

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Debtor 1 Angela Griggs Case number (if known)

| First Na                 | me Middle Name Last Name  |       |                                 |
|--------------------------|---|-------|---------------------------------|
| Part 4: Add th           | ne Amounts for Each Type of Unsecured Claim   |       |                                 |
|                          | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.   | for s | tatistical reporting purposes o |
|                          |   |       | Total claims                    |
| Total claims from Part 1 | 6a. Domestic support obligations.   | 6a.   | \$0.00                          |
|                          | 6b. Taxes and certain other debts you owe the government  | 6b.   | \$0.00                          |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.   | \$0.00                          |
|                          | 6d. Other. Add all other priority unsecured claims. Write that  | 6d.   | \$0.00                          |
|                          | amount here.  6e. Total. Add lines 6a through 6d.   | 6e.   | \$0.00                          |
|                          |   |       |                                 |
|                          |   |       | Total claims                    |
| Total claims from Part 2 | 6f. Student loans   | 6f.   | \$0.00                          |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.   | \$0.00                          |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.   | \$0.00                          |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write  | 6i.   | \$23,820.00                     |
|                          | that amount here.   |       |                                 |
|                          | 6j. Total. Add lines 6f through 6i.   | 6j.   | \$23,820.00                     |

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| Fill in this infor                      | mation to identify your ca | ase:        |                             |  |  |  |
|---|----------------------------|-------------|-----------------------------|--|--|--|
| Debtor 1                                | Angela                     |             | Griggs                      |  |  |  |
|   | First Name                 | Middle Name | Last Name                   |  |  |  |
| Debtor 2                                |                            |             |                             |  |  |  |
| (Spouse, if filing)                     | First Name                 | Middle Name | Last Name                   |  |  |  |
| United States Bankruptcy Court for the: |                            | Northern    | District of Illinois(State) |  |  |  |
| Case number<br>(If known)               |                            |             | (Citato)                    |  |  |  |

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or com                           | pany with whom you have | the contract or lease | State what the contract or lease is for      |  |  |
|-----|---|-------------------------|-----------------------|--|--|--|
| 2.1 | Landlord, Andy<br>Name<br>4938 W Washin |                         | -                     | Other,<br>Other,<br>1 year residential lease |  |  |
|     | Number                                  | Street                  |                       |  |  |  |
|     | Chicago                                 | Illinois                | 60644                 |  |  |  |
|     | City                                    | State                   | Zip Code              |  |  |  |

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|                             |  | Do   | cument Pag   | e 35 of 80   |                                    |
|-----------------------------|--|--|--|--|------------------------------------|
| Fill in this                | information to identify your o   | case:  |  |  |                                    |
| Debtor 1                    | Angela   |  | Griggs   |  |                                    |
| Dahta : 0                   | First Name   | Middle Name  | Last Name  |  |                                    |
| Debtor 2<br>(Spouse, if fil | ing) First Name  | Middle Name  | Last Name  | <del></del>  |                                    |
| United Sta                  | ates Bankruptcy Court for the:   | Northern   | District of Illinois   |  |                                    |
| Case num                    | ber  |  | (State)  |  |                                    |
| (If known)                  |  |  |  |  |                                    |
|                             |  |  |  |  | Check if this is an amended filing |
| Offici                      | al Form 106H   |  |  |  |                                    |
|                             |  | dobtoro  |  |  | 40/45                              |
| Sched                       | lule H: Your Co  | debtors  |  |  | 12/15                              |
| 1. Do                       | ifornia, Idaho, Louisiana, Neva<br>No. Go to line 3.<br>Yes. Did your spouse, for<br>No<br>Yes. In which commu | ou lived in a community p<br>ada, New Mexico, Puerto Ri<br>mer spouse, or legal equi | roperty state or territo<br>co, Texas, Washington, a<br>valent live with you at th<br>ou live? | ry? (Community property states and territories inclu<br>and Wisconsin.)  |                                    |
|                             | Number Street  |  |  |  |                                    |
|                             | Number Street  |  |  |  |                                    |
|                             | City   | State  | Zip Co   | ode  |                                    |
| aga                         | ain as a codebtor only if tha  | t person is a guarantor o  | cosigner. Make sure y  | or if your spouse is filing with you. List the person ou have listed the creditor on Schedule D (Office Schedule D, Schedule E/F, or Schedule G to fill of the control of t | cial Form 106D),                   |
| Co                          | lumn 1: Your codebtor  |  |  | Column 2: The creditor to whom you o   | we the debt                        |
|                             |  |  |  | Check all schedules that apply:  |                                    |

Schedule D, line 2.1

Schedule E/F, line\_\_\_\_\_

Schedule G, line

 $\overline{\mathbf{V}}$ 

60624

Zip Code

3.1 Griggs, Maskarel

4131 W Washington Blvd FI 2

Illinois State

Name

Number

Chicago City

Street

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| Fill in this information                        | to identify:   | Vour case.   |                             |                            |                     |                               |   |                        |
|---|--|--|-----------------------------|----------------------------|---------------------|-------------------------------|---|------------------------|
|   | to lacitury  | your case.   | 0.1                         |                            |                     |                               |   |                        |
| Debtor 1 Angela<br>First Nan                    | ne   | Middle Name  | Griggs<br>Last N            |                            |                     |                               |   |                        |
| Debtor 2  |  |  |                             |                            |                     |                               | ock if this is:   |                        |
| (Spouse, if filing) First Nan                   | ne   | Middle Name  | Last N                      | lame                       |                     | -                             | An amended filing   |                        |
| United States Bankrupto                         | cy Court for   | Northern   | District of III             | inois                      |                     |                               | A supplement showing post-poexpenses as of the following d  |                        |
| the:  |  |  | (5                          | State)                     |                     | <u> </u>                      | expenses as or the following di   | ale.                   |
| Case number (If known)                          |  |  |                             |                            |                     | į                             | MM / DD / YYYY  |                        |
| Official Form                                   | 1061   |  |                             |                            |                     |                               |   |                        |
| Schedule I: Y                                   |  | come   |                             |                            |                     |                               |   | 12/1                   |
| responsible for supply<br>information about you | ing correct<br>r spouse. It<br>is needed<br>swer every | t information. If you are<br>f you are separated and<br>, attach a separate she<br>, question. | e married ar<br>d your spou | nd not fili<br>se is not 1 | ng joir<br>filing v | itly, and you<br>vith you, do | and Debtor 2), both are eq<br>r spouse is living with you,<br>not include information ab<br>ional pages, write your nai | , include<br>oout your |
| Fill in your employm                            | ent  |  | Debtor 1                    | l                          |                     |                               | Debtor 2  |                        |
| information.                                    |  |  |                             |                            |                     |                               |   |                        |
| If you have more than                           | one job,   | Employment status  | <b>✓</b> Emplo              | •                          |                     |                               | Employed  |                        |
| attach a separate page information about add    |  |  | Not E                       | Not Employed               |                     |                               | Not Employed  |                        |
| employers.                                      |  | Occupation   |                             |                            |                     |                               | _   |                        |
| •   | self-employed work.                                    |  | ar Car Wash                 |                            |                     |                               |   |                        |
| . ,   |  |  | 3940 W Washington           |                            |                     |                               |   |                        |
| Occupation may inclu or homemaker, if it ap     |  |  | Number Street               |                            |                     |                               | Number Street   |                        |
|   |  |  |                             |                            |                     |                               |   |                        |
|   |  |  | Chicago                     | Illino                     |                     | 60624                         |   | 7: 0 !                 |
|   |  |  | City                        | Stat                       | е                   | Zip Code                      | City State  | Zip Code               |
|   |  | How long employed there?   |                             |                            | _                   |                               |   |                        |
| Part 2: Give Details                            | s About M  | Ionthly Income   |                             |                            |                     |                               |   |                        |
| spouse unless you are                           | separated.<br>spouse have                              | e more than one employer,  | •                           |                            | ·                   | •                             | vrite \$0 in the space. Include y   |                        |
| more space, ander a c                           | op a. a.e oe.  |  |                             |                            | For De              | btor 1                        | For Debtor 2 or non-filing spouse   |                        |
|   | • .  | ry, and commissions (befo calculate what the monthly   |                             | 2.                         |                     | \$1,456.00                    |   |                        |
| 3. Estimate and list r                          | nonthly over   | time pay.  |                             | 3                          |                     | + \$0.00                      |   |                        |
| 4. Calculate gross in                           | come. Add lii  | ne 2 + line 3.   |                             | 4.                         |                     | \$1,456.00                    |   |                        |

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| Debtor 1Angela  | Griggs                   | Case number           | r (if                             |                         |
|---|--------------------------|-----------------------|-----------------------------------|-------------------------|
| First Name Middle Name  | Last Name                | known) For Debtor 1   | For Debtor 2 or non-filing spouse |                         |
| Copy line 4 here  | <b>→</b> 4.              | \$1,456.00            | 3 1                               |                         |
| 5. List all payroll deductions:   | <del>-</del>             |                       |                                   |                         |
| 5a. Tax, Medicare, and Social Security deductions   | 5a.                      | \$211.73              |                                   |                         |
| 5b. Mandatory contributions for retirement plans  | 5b.                      | \$0.00                |                                   |                         |
| 5c. Voluntary contributions for retirement plans  | 5c.                      | \$0.00                |                                   |                         |
| 5d. Required repayments of retirement fund loans  | 5d.                      | \$0.00                |                                   |                         |
| 5e. Insurance   | 5e.                      | \$0.00                |                                   |                         |
| 5f. Domestic support obligations  | 5f.                      | \$0.00                |                                   |                         |
| 5g. Union dues  | 5g.                      | \$0.00                |                                   |                         |
| 5h. Other deductions. Specify:  | _                        | \$0.00 +              |                                   |                         |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5  | <del>-</del>             | \$211.73              |                                   |                         |
| +5h.  | e +31 + 3g               | Ψ211.73               |                                   |                         |
| 7. Calculate total monthly take-home pay. Subtract line 6 from  | n line 4. 7              | \$1,244.27            | <del></del>                       |                         |
| 8. List all other income regularly received:  |                          |                       |                                   |                         |
| 8a. Net income from rental property and from operating a<br>business, profession, or farm   |                          |                       |                                   |                         |
| Attach a statement for each property and business showin gross receipts, ordinary and necessary business expenses the total monthly net income.   |                          | \$0.00                |                                   |                         |
| 8b. Interest and dividends  | 8b.                      | \$0.00                |                                   |                         |
| 8c. Family support payments that you, a non-filing spouse dependent regularly receive   | e, or a                  |                       |                                   |                         |
| Include alimony, spousal support, child support, maintena divorce settlement, and property settlement.  | ance,<br>8c. <u>-</u>    | \$0.00                |                                   |                         |
| 8d. Unemployment compensation   | 8d.                      | \$0.00                |                                   |                         |
| 8e. Social Security   | 8e.                      | \$0.00                |                                   |                         |
| 8f. Other government assistance that you regularly recein Include cash assistance and the value (if known) of any no cash assistance that you receive, such as food stamps (becominder the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | n-                       | \$0.00                |                                   |                         |
| 8g. Pension or retirement income  | 8g.                      | \$0.00                |                                   |                         |
| 8h. Other monthly income. Specify:  | 8h. +                    | \$0.00 +              |                                   |                         |
| 9. Add all other income Add lines $8a + 8b + 8c + 8d + 8e + 8f$   | +8g + 8h. 9.             | \$0.00                |                                   |                         |
| 10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filli   | 10.<br>ng spouse         | \$1,244.27 +          | =                                 | \$1,244.27              |
| <ol> <li>State all other regular contributions to the expenses tha<br/>Include contributions from an unmarried partner, members of<br/>friends or relatives.</li> <li>Do not include any amounts already included in lines 2-10 or</li> </ol>                       | your household, your d   | ependents, your roomn |                                   |                         |
| Specify:  |                          |                       | 11. +                             | \$0.00                  |
| 12. Add the amount in the last column of line 10 to the amount write that amount on the Summary of Schedules and Statistics   |                          |                       |                                   | \$2,316.47              |
| ·   |                          |                       |                                   | Combined monthly income |
| 13. Do you expect an increase or decrease within the year a   | fter you file this form? |                       |                                   |                         |
| Yes. Explain: Will be leaving Medical Gear LLC in the   | next couple months.      |                       |                                   |                         |

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Debtor 1Angela Griggs Case number (if First Name Middle Name Last Name known) **Describe Employment** Debtor 1 Debtor 2 **Employment status** Employed Employed Not Employed Not Employed Occupation Employer's name Help at Home Employer's address 1 N State Street, 8th Floor Number Street Number Street 60602 Illinois Chicago City State Zip Code City State Zip Code How long employed there? 1 year 5 months Debtor 1 Debtor 2 **Employment status** Employed Employed Not Employed Not Employed Occupation Employer's name Medical Gear LLC Employer's address 3501 Algonquin Road, Suite 560 Number Street Number Street Rolling Illinois 60008 City State Zip Code Meadows State Zip Code City How long employed there? 2 years

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Debtor 1 Angela Griggs Case number (if known)

Part 2: Give Details About Monthly Income

For Debtor 1 For Debtor 2 or non-filing spouse

8h.Other monthly income. Specify:

1. Help at Home \$745.07

\$327.12

2. Medical Gear LLC

Official Form 106l Schedule I: Your Income page 4

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|  |  | Do   | ocument Page                                  | 40 of 80          |  |                                  |
|--|--|--|---|-------------------|--|----------------------------------|
| Fill in this infor                                     | mation to identify y                     | our case:  |   |                   |  |                                  |
| Debtor 1   | Angela                                   |  | Griggs  |                   |  |                                  |
| Debtor 2   | First Name                               | Middle Name  | Last Name                                     | Check if the      | his is:                                |                                  |
| (Spouse, if filing)                                    | First Name                               | Middle Name  | Last Name                                     | —— An am          | nended filing                          |                                  |
| United States B  | ankruptcy Court fo                       | r the: Northern  | District of Illinois (State)                  |                   | plement showing poses as of the follow | ost-petition chapter 13ing date: |
| Case number (If known)                                 |  |  |   | MM /              | DD / YYYY                              |                                  |
|  | Form 106                                 |  |   |                   |  | 12/15                            |
| Be as complete<br>information. If i<br>(if known). Ans | e and accurate as                        | possible. If two married peop<br>ded, attach another sheet to<br>n.  |   |                   |  | rrect                            |
| 1. Is this a join                                      | nt case?                                 |  |   |                   |  |                                  |
| ✓ No. Go   | to line 2                                |  |   |                   |  |                                  |
| Yes. Do  | oes Debtor 2 live i                      | n a separate household?  |   |                   |  |                                  |
|  | No                                       |  |   |                   |  |                                  |
|  | ┛<br>Yes. Debtor 2 m                     | ust file Official Forms 106J-2, E                                    | xpenses for Separate House.                   | hold of Debtor 2. |  |                                  |
| 2. Do you have   | =<br>e dependents? [                     | <b>√</b> No  |   |                   |  |                                  |
| Do not list D<br>Debtor 2.                             |  | Yes. Fill out this information each dependent                        | for Dependent's relation Debtor 1 or Debtor 2 | •                 | dent's Does o                          | dependent live<br>ou?            |
|  | enses include<br>f people other          | <b>√</b> No  |   |                   |  |                                  |
| than<br>yourself and<br>dependents                     | d your                                   | Yes  |   |                   |  |                                  |
|  |  | oing Monthly Expenses  |   |                   |  |                                  |
| _  | f a date after the                       | our bankruptcy filing date unle<br>bankruptcy is filed. If this is a | •   | • •               | •                                      | •                                |
|  | •  | non-cash government assista<br>ded it on <i>Schedule I: Your Inc</i> | -   |                   |  | Your expenses                    |
|  | or home ownersh<br>or the ground or lot. | nip expenses for your residenc<br>4.                                 | e. Include first mortgage pa                  | yments and        | 4.                                     | \$173.00                         |
| If not incl  | uded in line 4:                          |  |   |                   |  |                                  |
| 4a. Real es  | state taxes                              |  |   |                   | 4a                                     | \$0.00                           |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Angela Griggs Case number (if known)
First Name Middle Name Last Name

| First Name   | Middle Name Las                          | t Name                              |            |               |
|--|--|-------------------------------------|------------|---------------|
|  |  |                                     |            | Your expenses |
| 5. Additional mortgage payme                                       | nts for your residence, such as home     | equity loans                        | 5.         | \$0.00        |
| 6. Utilities:  |  |                                     |            |               |
| 6a. Electricity, heat, natural ga                                  | IS .                                     |                                     | 6a.        | \$350.00      |
| 6b. Water, sewer, garbage co                                       | llection                                 |                                     | 6b.        | \$0.00        |
| 6c. Telephone, cell phone, In                                      | ternet, satellite, and cable services    |                                     | 6c.        | \$300.00      |
| 6d. Other. Specify:  |  |                                     | 6d         | \$0.00        |
| 7. Food and housekeeping sup                                       | plies                                    |                                     | 7.         | \$350.00      |
| 8. Childcare and children's ed                                     | ucation costs                            |                                     | 8.         | \$0.00        |
| 9. Clothing, laundry, and dry c                                    | leaning                                  |                                     | 9.         | \$75.00       |
| 10. Personal care products an                                      | d services                               |                                     | 10.        | \$75.00       |
| 11. Medical and dental expens                                      | ses                                      |                                     | 11.        | \$30.00       |
| 12. <b>Transportation.</b> Include gas Do not include car payments |  |                                     | 12.        | \$199.00      |
| 13. Entertainment, clubs, recre                                    | eation, newspapers, magazines, and       | books                               | 13.        | \$0.00        |
| 14. Charitable contributions a                                     | nd religious donations                   |                                     | 14.        | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance ded                 | ucted from your pay or included in lines | s 4 or 20.                          |            |               |
| 15a. Life insurance  |  |                                     | 15a        | \$0.00        |
| 15b. Health insurance  |  |                                     | 15b        | \$0.00        |
| 15c. Vehicle insurance   |  |                                     | 15c        | \$134.00      |
| 15d. Other insurance. Specify                                      | <u>:</u>                                 |                                     | 15d        | \$0.00        |
| 16. <b>Taxes.</b> Do not include taxes                             | deducted from your pay or included in    | lines 4 or 20.                      |            |               |
| Specify:   |  | <u></u>                             | 16         | \$0.00        |
| 17. Installment or lease payme                                     | ents:                                    |                                     | 10         |               |
| 17a. Car payments for Vehicle                                      |  |                                     | 17a        | \$0.00        |
| 17b. Car payments for Vehicle                                      | e 2                                      |                                     | 17b        | \$0.00        |
| 17c. Other. Specify: family s                                      | upport for grandchildren                 |                                     | 17c        | \$0.00        |
| 17d. Other. Specify:   |  |                                     | 17d        | \$0.00        |
|  | maintenance, and support that you        |                                     |            | \$0.00        |
|  | le I, Your Income (Official Form 106I    | •                                   | 18.        |               |
|  | to support others who do not live wit    | th you.                             |            |               |
| Specify:   |  | farm on an Cabadula I. Yann baanna  | 19.        | \$0.00        |
| 20a. Mortgages on other property                                   |  | form or on Schedule I: Your Income. | 20a        | \$0.00        |
| 20b. Real estate taxes.  | Sorty                                    |                                     | 20a<br>20b |               |
| 20c. Property, homeowner's,  | or renter's insurance                    |                                     |            | \$0.00        |
| 20d. Maintenance, repair, and                                      |  |                                     | 20c        | \$0.00        |
| 20e. Homeowner's associatio  |  |                                     | 20d        | \$0.00        |
| 206. Homeowife 5 associatio  | ii oi oondonnindin dues                  |                                     | 20e        | \$0.00        |

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| Debtor 1 Ange         |                           |                        | Griggs  | Case number (if known) |     |             |
|-----------------------|---------------------------|------------------------|---|------------------------|-----|-------------|
| First                 | Name                      | Middle Name            | Last Name   |                        |     |             |
| 21. <b>Other.</b> Spe | ecify:                    |                        |   |                        | 21  | \$0.00      |
| 22 Calculate          | your monthly expense      | e                      |   |                        |     |             |
|                       | nes 4 through 21.         | 3.                     |   |                        |     | \$1,686.00  |
|                       | · ·                       | f D-b-t 0) if          | fue us Official Ferral 100 L 0                              |                        |     | \$0.00      |
|                       | , , ,                     | ,, ,                   | from Official Form 106J-2                                   |                        |     | \$1,686.00  |
|                       | ne 22a and 22b. The res   |                        | enses.  |                        | 22. |             |
| 23. Calculate         | your monthly net incor    | ne.                    |   |                        |     |             |
| 23a. Copy             | line 12 (your combined r  | monthly income) from S | Schedule I.   |                        | 23a | \$2,316.47  |
| 23b. Copy             | your monthly expenses     | from line 22 above.    |   |                        | 23b | \$1,686.00  |
|                       | act your monthly expense  | , ,                    | icome.  |                        |     | \$630.47    |
| The r                 | esult is your monthly net | income.                |   |                        | 23c | <del></del> |
|                       |                           |                        | oan within the year or do y<br>nodification to the terms of |                        |     |             |

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| Fill in this infor                      | mation to identify your c | ase:        |                      |  |  |
|---|---------------------------|-------------|----------------------|--|--|
| Debtor 1                                | Angela                    |             | Griggs               |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |
| Debtor 2                                |                           |             |                      |  |  |
| (Spouse, if filing)                     | First Name                | Middle Name | Last Name            |  |  |
| United States Bankruptcy Court for the: |                           | Northern    | District of Illinois |  |  |
|   |                           |             | (State)              |  |  |
| Case number (If known)                  |                           |             |                      |  |  |

#### Official Form 106Dec

| П | Check if this is an |
|---|---------------------|
|   | amended filing      |

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |  |  |  |  |  |  |  |
|-----|--|--|--|--|--|--|--|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  |  |  |  |  |  |  |  |
|     | ✓ No   |  |  |  |  |  |  |  |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and<br>Signature (Official Form 119). |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |
|     | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and  |  |  |  |  |  |  |
| ×   | /s/ Angela Griggs  | ×  |  |  |  |  |  |  |
|     | Signature of Debtor 1  | Signature of Debtor 2  |  |  |  |  |  |  |
|     | Date 1/30/2017   | Date   |  |  |  |  |  |  |
|     | MM/DD/YYYY   | MM/DD/YYYY   |  |  |  |  |  |  |

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| Fill ir         | n this info              | ormation to identify your   | case:               |                            |                   |                  |                   |                                   |
|-----------------|--------------------------|---|---------------------|----------------------------|-------------------|------------------|-------------------|-----------------------------------|
| Debt            | tor 1                    | Angela<br>First Name  | Middle I            | Griggs<br>Name Last Na     | me                | _                |                   |                                   |
| Debt<br>(Spot   | tor 2<br>use, if filing) | First Name  | Middle I            | Name Last Na               | me                | -                |                   |                                   |
| Unite           | ed States                | Bankruptcy Court for the:   | Northern            | District of Illin          |                   | _                |                   |                                   |
| Case<br>(If kno | e numbe                  | r   |                     | (St                        | ate)              | _                |                   |                                   |
|                 |                          | I Form 107  |                     |                            |                   |                  |                   | Check if this is a amended filing |
|                 |                          | ent of Financia   | al Affaira f        |                            | . Eilina fa       | u Bankuu         | untov.            | Ç.                                |
| Be as           | s comp<br>mation         | lete and accurate as po<br>. If more space is need<br>(nown). Answer every o              | ed, attach a sep    | arried people are filing   | g together, bo    | th are equally i | responsible for s |                                   |
| Part            | Giv                      | ve Details About Your   | Marital Status      | and Where You Live         | d Before          |                  |                   |                                   |
| 1.              | What i                   | is your current marital st  | atus?               |                            |                   |                  |                   |                                   |
|                 |                          | larried<br>ot married   |                     |                            |                   |                  |                   |                                   |
| 2.              | During                   | g the last 3 years, have y  | ou lived anywhere   | e other than where you     | live now?         |                  |                   |                                   |
|                 | ✓ No                     | o<br>es. List all of the places y   | ou lived in the las | t 3 years. Do not include  | e where you live  | now.             |                   |                                   |
|                 | D                        | ebtor 1:  |                     | Dates Debtor 1 lived there | Debtor 2:         |                  |                   | Dates Debtor 2 lived there        |
|                 |                          |   |                     |                            | Same              | as Debtor 1      |                   | Same as Debtor 1                  |
|                 | N                        | umber Street  |                     | From                       | Number St         | reet             |                   | From                              |
|                 | C                        | ity State   | Zip Code            |                            | City              | State            | Zip Code          |                                   |
|                 |                          |   |                     |                            | Same              | as Debtor 1      |                   | Same as Debtor 1                  |
|                 | N                        | umber Street  |                     | From                       | Number St         | reet             |                   | From                              |
|                 | C                        | ity State   | Zip Code            |                            | City              | State            | Zip Code          |                                   |
| 3.              | and territ               | the last 8 years, did you of tories include Arizona, Calif<br>s. Make sure you fill out S | ornia, Idaho, Louis | siana, Nevada, New Mexic   | o, Puerto Rico, 1 |                  |                   |                                   |

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Debtor 1 Angela Griggs Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$1008.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$20000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$12713.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Griggs Debtor 1 Angela Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| or 1              | Angela                                 |  |  | Gı                                       | riggs   | Case number                                  | (if known)  |
|-------------------|--|--|--|--|---|--|---|
|                   | First Name                             |  | Middle Name  | La                                       | st Name                                       |  |   |
| nsi<br>orp<br>ige | ders include your<br>porations of whic | relatives; a<br>h you are a<br>for a busir | any general partner<br>an officer, director,<br>ness you operate a | s; relatives of any<br>person in control | general partners; par<br>, or owner of 20% or | tnerships of which y<br>more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| <b>✓</b>          | No                                     |  |  |  |   |  |   |
|                   | Yes. List all pay                      | yments to                                  | an insider.  | Dates of                                 | Total amount                                  | Amount you                                   | Reason for this payment   |
|                   |  |  |  | payment                                  | paid  | still owe                                    |   |
|                   | Insider's Name                         |  |  |  |   |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
|                   | City                                   | State                                      | Zip Code   |  |   |  |   |
|                   | Insider's Name                         |  |  |  | <u> </u>                                      |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
|                   |  |  |  |  |   |  |   |
|                   | City                                   | State                                      | Zip Code   |  |   |  |   |
|                   | No                                     |  | aranteed or cosigne<br>at benefited an ins                         | -  | Total amount paid                             | Amount you still owe                         | Reason for this payment  Include creditor's name  |
|                   | Insider's Name                         |  |  |  | <u> </u>                                      |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
| _                 | City                                   | State                                      | Zip Code   |  |   |  |   |
|                   | Insider's Name                         |  |  |  |   |  |   |
|                   | Number Street                          |  |  |  |   |  |   |
|                   |  |  |  |  |   |  |   |
|                   | City                                   | State                                      | Zip Code   |  |   |  |   |

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Debtor 1 Angela Case number (if known) Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Angela   | Griggs                      | Case number (if known)                         |                       |
|------|--|-----------------------------|--|-----------------------|
|      | First Name Middle Name   | Last Name                   |  |                       |
| 11.  | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you       |                             | pank or financial institution, set off any amo | ounts from your       |
|      | ✓ No  Yes. Fill in the details.  |                             |  |                       |
|      |  | Describe the action th      | e creditor took  Date action was taken         | Amount                |
|      | Creditor's Name  |                             |  | -                     |
|      | Number Street  |                             |  |                       |
|      |  | Last 4 digits of account    | number: XXXX-                                  |                       |
|      | City State Zip Code  |                             |  |                       |
| 12.  | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official? |                             | possession of an assignee for the benefit o    | f creditors, a court- |
|      | <b>✓</b> No  |                             |  |                       |
|      | Yes  |                             |  |                       |
| Part | 5: List Certain Gifts and Contributions  |                             |  |                       |
| 13.  | Within 2 years before you filed for bankruptcy, did  | you give any gifts with a t | otal value of more than \$600 per person?      |                       |
|      | ✓ No  Yes. Fill in the details for each gift.  |                             |  |                       |
|      | Gifts with a total value of more than \$600 per person   | Describe the gifts          | Dates you gave the gifts                       | Value                 |
|      |  |                             |  |                       |
|      | Person to Whom You Gave the Gift   |                             |  | -                     |
|      | Number Street  |                             |  |                       |
|      | City State Zip Code  |                             |  |                       |
|      | Person's relationship to you   |                             |  |                       |
|      | Person to Whom You Gave the Gift   |                             |  |                       |
|      |  |                             |  |                       |
|      | Number Street  |                             |  |                       |
|      | City State Zip Code  |                             |  |                       |
|      | Person's relationship to you   |                             |  |                       |

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| ebtori   | Angela   | Griggs  | Case number (if know       | n)                                |                     |
|----------|--|---|----------------------------|-----------------------------------|---------------------|
|          | First Name Middle Name   | Last Name   | <u> </u>                   |                                   |                     |
|          |  |   |                            |                                   |                     |
| . Wit    | thin 2 years before you filed for bankruptcy   | , did you give any gifts or contribution  | ons with a total value o   | of more than \$600                | to any charity?     |
| <b>✓</b> | No   |   |                            |                                   |                     |
| Ħ        | Yes. Fill in the details for each gift or contr  | ibution   |                            |                                   |                     |
| ш        |  |   |                            |                                   |                     |
|          | Gifts or contributions to charities  | Describe what you contribu  | ited                       | Date you contributed              | Value               |
|          | that total more than \$600   |   |                            | contributed                       |                     |
|          |  |   |                            | -                                 | -                   |
|          | Charity's Name   |   |                            |                                   |                     |
|          |  |   |                            |                                   |                     |
|          |  |   |                            |                                   |                     |
|          | Number Street  |   |                            |                                   |                     |
|          |  |   |                            |                                   |                     |
|          | City State Zip Code  |   |                            |                                   |                     |
|          | lucio de la companya   |   |                            |                                   |                     |
| t 6:     | List Certain Losses  |   |                            |                                   |                     |
|          |  |   |                            |                                   |                     |
|          | thin 1 year before you filed for bankruptcy on the standard of | or since you filed for bankruptcy, did  | you lose anything bec      | ause of theft, fire,              | other disaster, or  |
| yaı      | mbing:   |   |                            |                                   |                     |
| ✓        | No   |   |                            |                                   |                     |
| П        | Yes. Fill in the details.  |   |                            |                                   |                     |
|          | Describe the property you lost and   | Describe any insurance co   | vorage for the loss        | Date of your                      | Value of property   |
|          | how the loss occurred  | Include the amount that insu  |                            | loss                              | lost                |
|          |  | pending insurance claims on   |                            |                                   |                     |
|          |  | A/B: Property.  |                            |                                   |                     |
|          |  |   |                            |                                   |                     |
|          |  |   |                            |                                   |                     |
| + 7·     | List Certain Payments or Transfers   |   |                            |                                   |                     |
|          | thin 1 year before you filed for bankruptcy,<br>out seeking bankruptcy or preparing a banl<br>lude any attorneys, bankruptcy petition prepare  | kruptcy petition?   |                            |                                   | anyone you consulte |
|          | out seeking bankruptcy or preparing a bank   | kruptcy petition?   |                            |                                   | anyone you consulte |
|          | out seeking bankruptcy or preparing a banl<br>lude any attorneys, bankruptcy petition prepare  | kruptcy petition?   |                            |                                   | anyone you consulte |
|          | out seeking bankruptcy or preparing a banl<br>lude any attorneys, bankruptcy petition prepare<br>No  | kruptcy petition?<br>ers, or credit counseling agencies for se  | rvices required in your ba |                                   | anyone you consulte |
|          | out seeking bankruptcy or preparing a banl<br>lude any attorneys, bankruptcy petition prepare<br>No  | kruptcy petition?   | rvices required in your ba | ankruptcy.                        |                     |
|          | out seeking bankruptcy or preparing a banl<br>lude any attorneys, bankruptcy petition prepare<br>No  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an                                      | rvices required in your ba | Date payment                      | Amount of           |
|          | out seeking bankruptcy or preparing a banl<br>lude any attorneys, bankruptcy petition prepare<br>No  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an                                      | rvices required in your ba | Date payment or transfer          | Amount of           |
|          | out seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.   | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred                          | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street   | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred                          | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred                          | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street   | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred                          | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepared No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred                          | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603   | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepared No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603   | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code   | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid  | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |
|          | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Was Paid Number Street  Person Who Made the Payment, if Not You Person Who Was Paid  Other Street  Person Who Made the Payment, if Not You  Person Who Was Paid   | kruptcy petition? ers, or credit counseling agencies for se  Description and value of an transferred  Attorney's Fee - 350.00 | rvices required in your ba | Date payment or transfer was made | Amount of payment   |

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| Debt |             | Angela   |  | Griggs   | Case number (if known)    |                                     |                              |
|------|-------------|--|--|--|---------------------------|-------------------------------------|------------------------------|
|      |             | First Name   | Middle Name  | Last Name  |                           |                                     |                              |
| 17.  | help        | o you deal with your credinot include any payment or                             | tors or to make payme                                |  | ur behalf pay or transfer | any property to ar                  | nyone who promised to        |
|      |             | No<br>Yes. Fill in the details.  |  |  |                           |                                     |                              |
|      |             |  |  | Description and value of ar transferred          | ny property               | Date payment or transfer was made   | Amount of payment            |
|      |             | Person Who Was Paid  |  |  |                           |                                     |                              |
|      |             | Number Street  |  |  |                           |                                     |                              |
|      |             | City State   | Zip Code   |  |                           |                                     |                              |
| 18.  | the<br>Incl | ordinary course of your b  | usiness or financial aff<br>and transfers made as se | ecurity (such as the granting of a               |                           |                                     |                              |
|      |             |  |  | Description and value of ar property transferred |                           | / property or<br>ceived or debts pa | Date<br>transfer was<br>made |
|      |             | Person Who Received Tran   | nsfer  |  |                           |                                     |                              |
|      |             | Number Street  |  |  |                           |                                     |                              |
|      |             | City State<br>Person's relationship to yo  | Zip Code<br>ou                                       |  |                           |                                     |                              |
|      |             | Person Who Received Tran   | nsfer  |  |                           |                                     |                              |
|      |             | Number Street  |  |  |                           |                                     |                              |
|      |             | City State<br>Person's relationship to yo  | Zip Code<br>ou                                       |  |                           |                                     |                              |
| 19.  | ben         | hin 10 years before you fil<br>eficiary?<br>ese are often called asset-pro<br>No |  | you transfer any property to a                   | self-settled trust or sim | ilar device of whic                 | th you are a                 |
|      |             | Yes. Fill in the details.  |  | Description and value of t                       | he property transferred   |                                     | Date<br>transfer was         |
|      |             | Name of trust  |  |  |                           |                                     | made                         |

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Griggs Debtor 1 Angela Case number (if known) Middle Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Debtor 1 Angela Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt |      | Angela<br>First Name   | Middle Name                              |            | Griggs<br>Last Name      | Case               | number (if i   | known)                   |                    |
|------|------|--|--|------------|--------------------------|--------------------|--|--------------------------|--------------------|
|      |      | FIRST Name   | Middle Name                              |            | Last Name                |                    |  |                          |                    |
| 26.  | _    | ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. |  |            | ders.                    |                    |  |                          |                    |
|      |      | No<br>Yes. Fill in the deta  | ails.                                    |            |                          |                    |  |                          |                    |
|      |      |  |  | Cou        | rt or agency             |                    | Nature o   | f the case               | Status of the case |
|      |      | Case title   |  | Coui       | rt Name                  |                    |  |                          | Pending            |
|      |      | Case number  |  | Num        | nberStreet               |                    |  |                          | On appeal          |
|      |      |  |  | City       | State                    | Zip Code           |  |                          | Concluded          |
| Part | 11:  | Give Details Ab  | out Your Business o                      | r Conne    | ections to Any Bu        | siness             |  |                          |                    |
| 27.  | Witl | hin 4 years before y   | ou filed for bankruptc                   | ,, did you | ı own a business or      | have any of the fo | ollowing co  | onnections to any busine | ss?                |
|      |      |  | etor or self-employed in                 |            |                          | -                  | ll-time or p   | art-time                 |                    |
|      |      | A member of a  | a limited liability compa<br>partnership | iny (LLC)  | or irrilled liability pa | irthership (LLP)   |  |                          |                    |
|      |      | ш .  | ector, or managing exe                   | cutive of  | a corporation            |                    |  |                          |                    |
|      |      |  | t least 5% of the voting                 |            | *                        | ooration           |  |                          |                    |
|      |      | No. None of the ab   | pove applies. Go to Pa                   | rt 12.     |                          |                    |  |                          |                    |
|      | H    |  | t apply above and fill ir                |            | ails below for each b    | ousiness.          |  |                          |                    |
|      |      |  | 11.7                                     |            | Describe the natu        |                    | business Employer Identification n include Social Security n |                          |                    |
|      |      | Business Name  |  |            |                          |                    |  | EIN:                     |                    |
|      |      | Number Street  |  |            |                          |                    |  | Dates business existed   |                    |
|      |      | City   | State Zip Cod                            | <u> </u>   | Name of account          | ant or bookkeepe   | r  | From To                  |                    |
|      |      |  |  |            |                          |                    |  | 10111                    |                    |
|      |      |  |  |            |                          |                    | s Employer Identification number Do not                      |                          |                    |
|      |      |  |  |            | Describe the natu        | ire of the busines | S  | include Social Security  |                    |
|      |      | Business Name  |  |            |                          |                    |  | EIN:                     |                    |
|      |      | Number Street  |  |            | Name of account          | ant or bookkeene   | r  | Dates business existed   |                    |
|      |      | City   | State Zip Cod                            | e          |                          |                    | -  | From To                  |                    |
|      |      |  |  |            |                          |                    |  |                          |                    |
|      |      |  |  |            | Describe the natu        | ıre of the busines | s  | Employer Identification  | number Do not      |
|      |      |  |  |            |                          |                    |  | include Social Security  |                    |
|      |      | Business Name  |  |            |                          |                    |  | EIN:                     |                    |
|      |      | Number Street  |  |            | Name of account          | ant or bookkeepe   | r  | Dates business existed   |                    |
|      |      | City   | State Zip Cod                            | e          |                          |                    |  | From To                  |                    |
|      |      |  |  |            |                          |                    |  |                          |                    |

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| Deb  | tor 1 Angela                                      |                                | Griggs                         | Case number (if known)  |
|------|---|--------------------------------|--------------------------------|---|
|      | First Name  | Middle Name                    | Last Name                      |   |
| 28.  | Within 2 years before creditors, or other par     |                                | ou give a financial stateme    | nt to anyone about your business? Include all financial institutions,   |
|      | Yes. Fill in the deta                             | ails below.                    |                                |   |
|      | _   |                                | Date issued                    |   |
|      | News  |                                | MM/DD/YYYY                     |   |
|      | Name  |                                | WIW/DD/TTTT                    |   |
|      | Number Street                                     |                                | _                              |   |
|      |   |                                | <u> </u>                       |   |
|      | City  | State Zip Code                 |                                |   |
| Pari | t 12: Sign Below                                  |                                |                                |   |
| 1    | true and correct. I unde<br>a bankruptcy case can | rstand that making a false sta | atement, concealing proper     | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |   | re of Debtor 1                 |                                | Signature of Debtor 2   |
|      | - J   |                                |                                | Date  |
|      | Date 1  | /30/2017                       |                                |   |
| ı    | Did you attach addition                           | al pages to Your Statement of  | Financial Affairs for Individ  | uals Filing for Bankruptcy (Official Form 107)?   |
|      | No  |                                |                                |   |
| i    | Yes   |                                |                                |   |
| ı    | Did you pay or agree to                           | pay someone who is not an a    | ttorney to help you fill out b | ankruptcy forms?  |
|      | <b>✓</b> No                                       |                                |                                |   |
| ĺ    | Yes. Name of person                               |                                |                                | Attach the Bankruptcy Petition Preparer's Notice,   |

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B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re | Angela Griggs   | Case No.                                |                             |
|-------|---|---|-----------------------------|
| -     | Debtor  |   | (If known)                  |
|       |   | Chapter                                 | Chapter 13                  |
|       | DISCLOSURE OF COMPENSATION  | ON OF ATTORNEY F                        | OR DEBTOR                   |
| 1     | . Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce compensation paid to me within one year before the filing of th rendered or to be rendered on behalf of the debtor(s) in contempts. | ne petition in bankruptcy, or agreed to | be paid to me, for services |
|       | For legal services, I have agreed to accept   |   | \$4,000.0                   |
|       | Prior to the filing of this statement I have received   |   | \$350.0                     |
|       | Balance Due   |   | \$3,650.0                   |
| 2     | . The source of the compensation paid to me was:  |   |                             |
|       | Debtor Other (specif  | fy)                                     |                             |
| 3     | . The source of the compensation paid to me is:   |   |                             |
|       | Debtor Other (specif  | fy)                                     |                             |
| 4     | I have not agreed to share the above-disclosed compensate members and associates of my law firm.  | tion with any other person unless the   | y are                       |
|       | I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the agree the people sharing in the compensation, is attached.                                |   |                             |
| 5     | <ul> <li>In return for the above-disclosed fee, I have agreed to render le<br/>a. Analysis of the debtor's financial situation, and rendering<br/>bankruptcy;</li> </ul>                              |   |                             |
|       | b. Preparation and filing of any petition, schedules, stater  | nents of affairs and plan which may b   | pe required;                |
|       | c. Representation of the debtor at the meeting of creditors   | s and confirmation hearing, and any a   | adjourned hearings thereof; |
|       | d. Representation of the debtor in adversary proceedings  | and other contested bankruptcy mat      | ters;                       |
| 6     | s. By agreement with the debtor(s), the above-disclosed fee does  | not include the following services:     |                             |
|       |   |   |                             |

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B 203 (12/94)

| CERTIFICATION  |                       |  |  |
|--|-----------------------|--|--|
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. |                       |  |  |
| 1/30/2017 /s/ Angie Harb   |                       |  |  |
| Date   | Signature of Attorney |  |  |
|  | Semrad Law Firm       |  |  |
|  | Name of law firm      |  |  |

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- I. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to \$1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filling, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of 4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 1/19/2017               |                        |
|-------------------------------|------------------------|
| Signed:                       |                        |
| /s/ Angela Griggs WWW WWW WWW | A                      |
| Y Y                           | /s/ Angie Harb UM      |
| Debtor(s)                     | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:     | 1/30/2017  |                        |
|-----------|------------|------------------------|
| Signed:   |            |                        |
| /s/ Ange  | ela Griggs |                        |
|           |            | /s/ Angie Harb         |
| Debtor(s) |            | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|         | \$1,167 | filing fee         |  |  |
|---------|---------|--------------------|--|--|
| +       | \$550   | administrative fee |  |  |
| \$1,717 |         | total fee          |  |  |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   |          | filing fee<br>administrative fee |
|---|----------|----------------------------------|
| + | <u> </u> |                                  |
|   | \$275    | total fee                        |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Griggs, Angela  Debtor(s) | Case No   | Case No                              |  |  |
|-----------------|---------------------------|---|--------------------------------------|--|--|
|                 |                           | Chapter.  | Chapter13                            |  |  |
|                 | VERIFI                    | CATION OF CREDITOR MAT                                  | TRIX                                 |  |  |
| TI<br>knowledge |                           | fy that the attached list of creditors is to            | rue and correct to the best of their |  |  |
| Date:           | 1/30/2017                 | /s/ Griggs, Angel<br>Griggs, Angela<br>Signature of Del |                                      |  |  |

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI, 48243

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

Carmax Auto Finance 2040 Thalbro St. Richmond, VA, 23230

MERRICK BANK POB 9201 OLD BETHPAGE, NY, 11804

ECMC PO Box 16408 Saint Paul, MN, 55116

SECOND ROUND LP 4150 FRIEDRICH LANE SUIT AUSTIN, TX, 78744

GE Capital Retail Bank PO Box 4571 Carol Stream, IL, 60197

PORTFOLIO RECOVERY ASS c/o Shindarella Morris PO Box 41067 Norfolk, VA, 23541

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD, 57107

GINNY'S INC 1112 7TH AVE POB 2816 MONROE, WI, 53566

CCI 501 Greene Street # 302 Augusta, GA, 30901

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Comed Po Box 805379 Chicago, IL, 60680

MONTGOMERY WARD 1112 7TH AVE MONROE, WI, 53566

NORTHWEST COLLECTORS 3601 ALGONQUIN RD STE 23 ROLLING MEADOWS, IL, 60008

M3 Financial Services 10330 Roosevelt Rd #200 Westchester, IL, 60154

DRLEONARDS PO BOX 2845 MONROE, WI, 53566

US Bank Po Box 5229 C/O Bankruptcy Department Cincinnati, OH, 45201

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL, 60622

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

Village of Melrose Park 1 N. Broadway Melrose Park, IL, 60160

Enterprise Rent a Car 600 Corporate Park Drive Saint Louis, MO, 63105

Peoples Gas 200 E. Randolph Chicago, IL, 60601 Nicor Gas 90 N. Finley Road Glen Ellyn, IL, 60137

Hertz Rent A Car Dept 1190 PO BOX 121190 Dallas, TX, 75312

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| Debtor 1 Angela First Name  | Middle Name  | Griggs   | Case number (if kno  | zuwil  |  |
|---|--|--|--|--|--|
|   |  | Last Name  |  |  |  |
| <ul><li>16. What kind of debts do you have?</li><li>17. Are you filing under Chapter 7?</li></ul>   | No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primari money for a business of No. Go to line 16c. Yes. Go to line 17.  16c. State the type of debts y   | ily consumer debt<br>ual primarily for a primarily for a primarily for a primarily for a primarily business debts?<br>If investment or through the primary out owe that are not provided that are not provided that are not provided to the primary of the p | ersonal, family, or house Business debts are debugh the operation of the consumer debts or business are debts or business. | ebts that you incurred to obtain<br>the business or investment.<br>usiness debts.                                    |  |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No.  | er 7. Do you estimate<br>funds will be availab   | that after any exempt pr<br>le to distribute to unsecu   | operty is excluded and administrative<br>red creditors?  |  |
| 18. How many creditors do you estimate that you owe?  | ☑ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | 1,000-5<br>5,001-1<br>10,001-  | 0,000  | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | 【】\$10,000<br>【】\$50,000   | 001-\$10 million<br>0,001-\$50 million<br>0,001-\$100 million<br>10,001-\$500 million                                      | S500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion           |  |
| 20. How much do you estimate your liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | [] \$10,000<br>[] \$50,000   | 001-\$10 million<br>,001-\$50 million<br>,001-\$100 million<br>0,001-\$500 million   | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |
|   | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  **  /s/ Angela Griggs  Signature of Debtor 1  Signature of Debtor 2 |  |  |  |  |
| i kan maka sa kan maka kan kan kan maka maka maka kan kan kan kan kan kan kan kan kan   | MM / DD  | / YYYY   | Executed or  | MM / DD / YYYY   |  |

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| Fill in this inf    | ormation to identify you   | r case   |   |  |                                    |
|---------------------|--|--|---|--|------------------------------------|
| Debtor 1            | Angela   |  |   |  |                                    |
|                     | First Name   | Middle Name  | Griggs  |  |                                    |
| Debtor 2            |  | madio Hange  | Last Name   |  |                                    |
| (Spouse, if filing) | First Name   | Middle Name  | Last Name   |  |                                    |
| United States       | Bankruptcy Court for the   | e: Northern  | District of Illinois                                |  |                                    |
| Case number         |  | ***************************************  | (State)   |  | •                                  |
| (If known)          |  |  |   |  |                                    |
| Ott: -; -1          |  |  |   |  |                                    |
| Uniciai             | Form 106D  | ec   |   |  | Check if this is ar amended filing |
| Declara             | tion About an  | Individual Debto   |   |  | amended sing                       |
|                     | don About an   | mulviduai Debto  | r's Schedules                                       | ****   | 12/15                              |
| ii two married      | people are filing toget  | her, both are equally responsi   | ble for supplying correct i                         | nformation.  |                                    |
| You must file       | this form whenever you   | file heatenings  |   |  |                                    |
| U.S.C. §§ 152,      | Perty by traud in connect 1341, 1519, and 3571   | ction with a bankruptcy case o   | an result in fines up to \$2                        | ing a false statement, concealing prop<br>50,000, or imprisonment for up to 20 y | erty, or obtaining                 |
|                     | ,  |  |   | ,  | cara, or botti, 10                 |
| Part 19 Sign        | n Below  |  |   |  | •                                  |
| Paratas             |  |  |   |  |                                    |
| Dia you p           | ay or agree to pay som   | eone who is NOT an attorney  | to help you fill out bankru                         | ptcy forms?  |                                    |
| No No               |  |  |   |  |                                    |
| Yes.                | Name of person   |  | •   |  |                                    |
| termed              | ***************************************  |  | Attach Bankruptcy Petil<br>Signature (Official Form | lion Preparer's Notice, Declaration, and   |                                    |
|                     |  |  | Grand (Grandia ) Offi                               | . (13).  |                                    |
|                     |  |  |   |  |                                    |
|                     |  |  |   |  |                                    |
| 11                  |  |  |   |  |                                    |
| that they           | nalty of perjury, I declar<br>are true and correct.  | re that I have read the summa  | ry and schedules filed with                         | n this declaration and   |                                    |
|                     | $\wedge$   | 1. M. M. Ja  |   | =. <b></b>   |                                    |
| 🗶 /s/ Angel         |  | W/W/Y  | ×   |  |                                    |
| Signature o         | f Debtor 1   | 7 7  | Signature of I                                      | Debtor 2   | -                                  |
| Date 1/19           | /2017  |  |   |  |                                    |
| MM/                 | DD/YYYY  |  | Date  | <u> </u>   | :                                  |
|                     | and the state of t | and the second of the second o | ININI/DI  | 71111  |                                    |

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| Debtor  | 1 Angela                               |   |   | Griggs   |  |     |
|---------|--|---|---|--|--|-----|
|         | First Name                             |   | Middle Name   | Last Name  | Case number (if known)   |     |
| 28. W   | ithin 2 years be<br>reditors, or othe  | efore you filed for<br>er parties.  | bankruptcy, did y   | ou give a financial staten   | nent to anyone about your business? Include all financial institutio   | ons |
|         | No<br>Yes, Fill in the                 | e details below.  |   |  |  |     |
|         |  |   |   | Date issued  |  |     |
|         | Name                                   |   |   | MM/DD/YYYY   | ••   |     |
|         | Number Str                             | eet   |   | ***  |  |     |
|         | City                                   | State   | Zip Code  | ••   |  |     |
| 2016 12 | Sign Below                             |   | 210 0000  |  |  |     |
| a ba    | ************************************** | understand that m<br>can result in fines<br>/s/ Angela Griggs<br>nature of Debtor 1 | aking a false star<br>up to \$250,000,  | tement, concealing proper<br>or imprisonment for up to   | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |     |
|         | Gig                                    | margre of Debtot (  | ¥   | <i>.</i>   | Signature of Debtor 2  |     |
|         | Da                                     | te 1/19/2017  |   |  | Date   |     |
| Did y   | ou attach addi                         | tional pages to Yo  | ur Statement of F   | inancial Affairs for Indivi-   | duals Filing for Bankruptcy (Official Form 107)?   |     |
|         | lo<br>'es                              |   |   | The state of the s | was rang for Bankruptcy (Official Form 107)?   |     |
| Did ye  | ou pay or agree                        | to pay someone i  | who is not an atte  | orney to help you fill out b   |  |     |
|         | lo                                     |   | / *****   | to neit you mi our p   | ankruptcy forms?   |     |
| ΠY      | es. Name of per                        | son   | Markana arawa a |  | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   | :   |

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# UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re:          | Griggs, Angela                   |   |
|-----------------|----------------------------------|---|
|                 | Debtor(s)                        | Case No   |
|                 |                                  | Chapter. Chapter13  |
|                 |                                  | ICATION OF CREDITOR MATRIX  |
| Th<br>knowledge | ne above named Debtors hereby vo | rify that the attached list of creditors is true and correct to the best of their |
| Date:           | 1/19/2017                        | /s/ Griggs, Angela Griggs, Angela Signature of Debtor                             |

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| Deb                  | for 1. Angela   |   | Crimor   | _   |   |
|----------------------|---|---|--|---|---|
|                      | First Name  | Middle Rone   | Griggs<br>Last Nama  | Case number (diknown)   |   |
| 16.                  | Calculate the median famil  | y income that applies to y  | ou. Follow these steps   | :   |   |
|                      | 16a. Fill in the state in which                                     |   | Illinois   |   |   |
|                      | 16b. Fill in the number of peo                                      | ple in your household.  | 1  | •   | •   |
|                      | 16c. Fill in the modian family                                      | income for your state and si  | ze of  |   | \$50,133,00   |
|                      | household<br>using the link specified in                            | the consents instanciant  | To find  | a list of applicable median income amounts, go online   | 570,170,330   |
| 17.                  | How do the lines compare?   | the achagas mannerous R   | of this form. This list ma   | a list of applicable median income amounts, go online<br>By also be available at the bankruptcy clerk's office. |   |
|                      | 17a. Line 15b is less that under 11 U.S.C. § 1                      | r or extual to line 16c. On th<br>(325/b)(3). <b>Go to Part 3.</b> De                         | e top of page 1 of this :<br>NOT fill out <i>Calculatio</i>  | form, check box 1. Disposable income is not determined not Disposable Income (Official Form 122C-2).            |   |
| erica: constituentos | 17b. Line 15b is more the U.S.C. § 1325(b)(3), form, copy your curr | in line 16c. On the top of pa<br>Go to Part 3 and fill out to<br>ent monthly income from line | oge 1 of this form, chec<br>Calculation of Disposs<br>re 14 above.   | k box 2. Disposable income is determined under 11 able Income (Official Form 122C-2). On line 39 of that        |   |
| Pon.                 | Calculate Your Comn   | nitment Period Under  | 11 U.S.C. §1325(b)   | (4)   |   |
| 18.                  | Copy your total average mor   | nthly income from line 11.  | A STATE OF THE PARTY OF THE PAR |   | 65 APA + F  |
| 19,                  |   |   | and the properties bear of he  | not filing with you, and you contend that calculating the<br>our spouse's income, copy the amount from line 13. | \$3,069.15  |
|                      | 19a. If the marital adjustment of                                   | does not apply, fill in 0 on li   | ie 19a.  | Taylor and the total  | -\$0.00   |
|                      | 19b. Subtract fine 19a from I                                       |   |  |   |   |
| 20.                  | Calculate your current mont   | hly income for the year. F  | oflow these steps:   |   | \$3,069,15  |
|                      | 20a. Copy line 19b.   |   |  |   | \$3,069.16  |
|                      | Multiply by 12 (the numb  | er of months in a year).  |  |   |   |
|                      | 20b. The result is your current i                                   | monthly income for the year   | for this part of the form  | ٦.  | x 12<br>\$36,829.80   |
|                      | 20c. Copy the median family in                                      | come for your state and six   | e of household from lin  | e 16c. AC   | \$50,133.00   |
| 21,                  | How do the lines compare?   |   |  | r į   |   |
|                      | Line 20b is less than line 2 commitment period is 3 ye              | 0c. Unless otherwise ordere<br>ars. Go to Part 4,   | d by the court, on the t   | op of page 1 of this torm, check box 3, The   |   |
|                      | Line 20b is more than or ea<br>4, <i>The commitment period</i>      | qual to line 20c. Unless other<br>is 5 years. Go to Part 4.                                   | rwise ordered by the co  | ourt, on the top of page 1 of this form, check box  |   |
| Plik:                | Sign Below  |   |  |   |   |
|                      | Fly stanian trans 1 dealers   |   | THE PARTY OF THE P |   | Helitik derpo program and desirate de la companya per |
|                      | ey aginig and, i decing (i  | nuer penalty of perjury that t  | he information on this :   | statement and in any attachments is true and correct.   |   |
|                      | 🗴 /s/ Angela Griggs   | AMULY, May in   | 1  |   |   |
|                      | Signature of Debtor 1   | 2 1 KAT I VETE  | // × <sub>=</sub>  |   |   |
|                      |   | /   | ЭК   | mature of Debtor 2  |   |
|                      | Date 1/27/2017<br>MM/DD/YYYY  |   | Da   |   |   |
|                      |   |   |  | MM/DD/YYYY  |   |

If you checked 17a, do NOT fill out or file Form 122C-2.
If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from fine 14